

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF PUERTO RICO

Case number (if known)

Chapter 11

☐ Check if this an amended filing

Official Form 201

# Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name MBTI OF PUERTO RICO INC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 39-1248358

4. Debtor's address Principal place of business

PONCE DE LEON AVENUE

PDA 18 1/2

San Juan, PR 00907-3917

Number, Street, City, State & ZIP Code

San Juan

County

Mailing address, if different from principal place of business

PONCE DE LEON AVENUE

PDA 18 1/2

San Juan, PR 00907-3917

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Fajardo, Mayaguez, Bayamon, and Santurce

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.mbtipr.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the above Educational Institution

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7  
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.  
☐ Yes.

If more than 2 cases, attach a separate list.

District	When	Case number
District	When	Case number

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No  
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	Relationship
District	When
	Case number, if known

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☐ 50-99

☐ 100-199

☒ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☒ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☒ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 7, 2016  
MM / DD / YYYY

X Barbara Alonso Vila  
Signature of authorized representative of debtor

BARBARA ALONSO VILA  
Printed name

Title PRESIDENT

**18. Signature of attorney**

X Charles A. Cuprill-Hernandez  
Signature of attorney for debtor

Date October 7, 2016  
MM / DD / YYYY

CHARLES A. CUPRILL-HERNANDEZ  
Printed name

CHARLES A CUPRILL PCS LAW OFFICES  
Firm name

356 FORTALEZA STREET  
SECOND FLOOR  
San Juan, PR 00901  
Number, Street, City, State & ZIP Code

Contact phone 787-977-0515

Email address ccuprill@cuprill.com

USDC-PR114312  
Bar number and State

**Fill in this information to identify the case:**

Debtor name **MBTI OF PUERTO RICO INC**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206Sum**  
**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>6,764,000.00</b>
<b>1b. Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>6,235,880.11</b>
<b>1c. Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>12,999,880.11</b>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>10,628,702.10</b>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>306,374.31</b>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>5,141,609.65</b>
<b>4. Total liabilities</b> Lines 2 + 3a + 3b.....	\$ <b>16,076,686.06</b>

**Fill in this information to identify the case:**

Debtor name **MBTI OF PUERTO RICO INC**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206A/B**

**Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of  
debtor's interest

2. **Cash on hand** REFER TO EXHIBIT I FOR DETAIL (PETTY CASH)

**\$5,770.00**

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)  
Name of institution (bank or brokerage firm) Type of account

Last 4 digits of account  
number

3.1.	ORIENTAL BANK RESTRICTED FUNDS ACCOUNT NO. 1960803570 BALANCE PER BANK STATEMENT AS OF AUGUST 31, 2016	CHECKING ACCOUNT	3570	\$10.00
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3.2.	ORIENTAL BANK OPERATIONAL ACCOUNT ACCOUNT NO. 1960803870 BALANCE PER BANK STATEMENT AS OF AUGUST 31, 2016	CHECKING ACCOUNT	3870	\$38,105.22
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3.3.	ORIENTAL BANK CAFES - CATERING ACCOUNT BALANCE PER BANK STATEMENT AS OF AUGUST 31, 2016	CHECING ACCOUNT	4429	\$0.00
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3.4.	ORIENTAL BANK PAYROLL ACCOUNT ACCOUNT NO. 1960803570 BALANCE PER BANK STATEMENT AS OF AUGUST 31, 2016	CHECKING ACCOUNT	3570	\$0.00
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Debtor	MBTI OF PUERTO RICO INC		Case number (if known)	
	Name			
3.5.	BANCO POPULAR DE PUERTO RICO ACCOUNT NO. 256015154 BALANCE AS PER BANK STATEMENT AS OF JULY 29, 2016	Checking Account	5154	\$10,410.66
3.6.	BANCO POPULAR DE PUERTO RICO ACCOUNT NO. 226-349458 BALANCE AS PER BANK STATEMENT AS OF JULY 29, 2016	Checking Account	9458	\$629.87
3.7.	BANCO POPULAR DE PUERTO RICO ACCOUNT NO. 226-349458 BALANCE AS PER BANK STATEMENT AS OF AUGUST 31, 2016			\$0.00
3.8.	BANCO POPULAR DE PUERTO RICO ACCOUNT NO. 226362575 BALANCE AS PER BANK STATEMENT AS OF JULY 29, 2016	Checking Account	2575	\$668.29
3.9.	BANCO POPULAR DE PUERTO RICO ACCOUNT NO. 030-863392 BALANCE AS PER BANK STATEMENT AS OF AUGUST 31, 2016	Checking Account	3392	\$5,925.23
3.10	COOPERATIVA DE AHORRO Y CREDITO MOCA ACCOUNT NO. BALANCE AS PER BANK STATEMENT AS OF AUGUST 31, 2016			\$198.22
3.11	COOPERATIVA DE AHORRO Y CREDITO BARRANQUITAS ACCOUNT NO. XXXXXX306 BALANCE AS PER BANK STATEMENT AS OF AUGUST 31, 2016	Checking Account	306	\$29,821.91
3.12	ORIENTAL BANK OPERATIONAL ACCOUNT ACCOUNT NO. 1980805071 BALANCE PER BANK STATEMENT AS OF AUGUST 31, 2016	CHECING ACCOUNT	5071	\$5,427.17
4.	Other cash equivalents (Identify all)			
4.1	ORIENTAL BANK CERTIFICATE OF DEPOSIT BALANCE AS OF AUGUST 31, 2016			\$403,900.92
4.2.	COOPERATIVA DE AHORRO Y CREDITO BARRANQUITAS CERTIFICATE OF DEPOSIT ACCOUNT NO. XXXXXX484 BALANCE AS OF AUGUST 31, 2016			\$726,205.25

Debtor MBTI OF PUERTO RICO INC  
Name

Case number (if known) \_\_\_\_\_

5. **Total of Part 1.**

**\$1,227,072.74**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.

☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**SECURITY DEPOSITS**

**REFER TO EXHIBIT IV FOR DETAIL**

7.1. **BALANCE AS OF AUGUST 31, 2016**

**\$123,171.81**

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**PREPAID EXPENSES**

**REFER TO EXHIBIT III FOR DETAIL**

8.1. **BALANCE AS OF AUGUST 31, 2016**

**\$291,370.40**

9. **Total of Part 2.**

**\$414,542.21**

Add lines 7 through 8. Copy the total to line 81.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

☐ No. Go to Part 4.

☒ Yes Fill in the information below.

11. **Accounts receivable**

11b. Over 90 days old: 13,304,848.00  
face amount

12,959,070.96 = ...  
doubtful or uncollectible accounts

**\$345,777.04**

11b. Over 90 days old: 1,376,420.84  
face amount

1,282,675.96 = ...  
doubtful or uncollectible accounts

**\$93,744.88**

REFER TO EXHIBIT V FOR DETAIL

12. **Total of Part 3.**

**\$439,521.92**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**Part 4: Investments**

13. Does the debtor own any investments?

☒ No. Go to Part 5.

☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

☐ No. Go to Part 6.

☒ Yes Fill in the information below.



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (If known)

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies <b>INVENTORIES REFER TO EXHIBIT II FOR DETAIL BALANCE AS OF AUGUST 31, 2016</b>		<b>\$225,468.47</b>	<b>COST</b>	<b>\$225,468.47</b>

23. Total of Part 5. \$225,468.47

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

☐ No

☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No

☐ Yes. Book value

Valuation method

Current Value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No

☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.

☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture <b>FURNITURE AND FIXTURES - SANTURCE</b>	<b>\$33,396.22</b>	<b>COST</b>	<b>\$88,585.03</b>
	<b>FURNITURE AND FIXTURES - BAYAMON</b>	<b>\$35,291.28</b>	<b>COST</b>	<b>\$89,021.81</b>
	<b>FURNITURE AND FIXTURES - FAJARDO</b>	<b>\$31,005.02</b>	<b>COST</b>	<b>\$82,064.95</b>
	<b>FURNITURE AND FIXTURES - MAYAGUEZ</b>	<b>\$28,597.46</b>	<b>COST</b>	<b>\$149,781.67</b>

Debtor **MBTI OF PUERTO RICO INC** Case number (if known) \_\_\_\_\_  
Name

<b>FURNITURE AND FIXTURES - SANTURCE</b>	<b>\$17,671.70</b>	<b>COST</b>	<b>\$75,509.06</b>
<b>CENTRAL OFFICE</b>			

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software  
**COMPUTER EQUIPMENT - SANTURCE**

<b>\$558.69</b>	<b>COST</b>	<b>\$3,329.64</b>
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<b>COMPUTER SOFTWARE - SANTURCE</b>	<b>\$1,260.23</b>	<b>COST</b>	<b>\$8,434.05</b>
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<b>LABORATORY EQUIPMENT - SANTURCE</b>	<b>\$64,996.27</b>	<b>COST</b>	<b>\$310,283.02</b>
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<b>ELECTRONIC &amp; COMMUNICATIONS EQUIPMENT - SANTURCE</b>	<b>\$0.00</b>	<b>COST</b>	<b>\$5,732.14</b>
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<b>COMPUTER EQUIPMENT - BAYAMON</b>	<b>\$1,497.18</b>	<b>COST</b>	<b>\$6,835.08</b>
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<b>COMPUTER SOFTWARE - BAYAMON</b>	<b>\$1,045.96</b>	<b>COST</b>	<b>\$5,274.90</b>
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<b>LABORATORY EQUIPMENT - BAYAMON</b>	<b>\$78,807.58</b>	<b>COST</b>	<b>\$227,701.50</b>
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<b>ELECTRONIC AND COMMUNICATIONS EQUIPMENT - BAYAMON</b>	<b>\$4,984.68</b>	<b>COST</b>	<b>\$15,249.79</b>
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<b>COMPUTER EQUIPMENT - FAJARDO</b>	<b>\$1,112.35</b>	<b>COST</b>	<b>\$4,964.95</b>
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<b>COMPUTER SOFTWARE - FAJARDO</b>	<b>\$982.71</b>	<b>COST</b>	<b>\$4,895.75</b>
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<b>LABORATORY EQUIPMENT - FAJARDO</b>	<b>\$61,074.00</b>	<b>COST</b>	<b>\$231,596.52</b>
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<b>ELECTRONIC AND COMMUNICATIONS EQUIPMENT - FAJARDO</b>	<b>\$1,837.43</b>	<b>COST</b>	<b>\$1,889.93</b>
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<b>COMPUTER EQUIPMENT - MAYAGUEZ</b>	<b>\$3,363.73</b>	<b>COST</b>	<b>\$18,940.80</b>
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<b>COMPUTER SOFTWARE - MAYAGUEZ</b>	<b>\$982.71</b>	<b>COST</b>	<b>\$4,895.75</b>
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<b>LABORATORY EQUIPMENT - MAYAGUEZ</b>	<b>\$56,734.91</b>	<b>COST</b>	<b>\$220,150.29</b>
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<b>COMPUTER EQUIPMENT - SANTURCE</b>	<b>\$5,750.90</b>	<b>COST</b>	<b>\$9,285.86</b>
<b>CENTRAL OFFICE</b>			

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**\$1,564,422.49**

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☐ No  
☒ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

**General description**  
Include year, make, model, and identification numbers  
(i.e., VIN, HIN, or N-number)

**Net book value of  
debtor's interest**  
(Where available)

**Valuation method used  
for current value**

**Current value of  
debtor's interest**

47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1 **2015 MERCEDES ML350**

**SERIAL NUM. 4JGDA55JB6FA577190**

**ESTIMATED FAIR MARKET VALUE**

**\$0.00**

**\$46,000.00**

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$46,000.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☐ No  
☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

**Description and location of  
property**  
Include street address or other  
description such as Assessor

**Nature and  
extent of  
debtor's interest  
in property**

**Net book value of  
debtor's interest**  
(Where available)

**Valuation method used  
for current value**

**Current value of  
debtor's interest**

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 6

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (If known)

Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

55.1.	COMMERCIAL BUILDING LOCATED AT 11 DE AGOSTO STREET, CORNER DR. BASORA, MAYAGUEZ, PUERTO RICO CADASTER NUM. 233-058-341-02-001 APPRAISED VALUE AS OF FEBRUARY 14, 2012	Fee simple	\$3,100,000.00	Appraised Value	\$3,100,000.00
55.2.	RESIDENTIAL PROPERTY LOCATED AT #1654 SANTA ANA STREET, SANTURCE WARD, SAN JUAN, PUERTO RICO. CADASTER NUM. 040-080-062-03-901 APPRAISED VALUE AS OF FEBRUARY 3, 2012	Fee simple	\$180,000.00	Appraised Value	\$180,000.00
55.3.	COMMERCIAL BUILDING LOCATED AT #1256 PONCE DE LEON AVENUE, CORNER RAMON FIGUEROA STREET, SANTURCE WARD, SAN JUAN, PUERTO RICO. CADASTER NUM. 040-059-034-10-901 APPRAISED VALUE AS OF JANUARY 27, 2012	Fee simple	\$2,200,000.00	Appraised Value	\$2,200,000.00
55.4.	COMMERCIAL BUILDING LOCATED AT LOT 164 OF MUÑOZ RIVERA STREET, FAJARDO, PUERTO RICO. CADASTER NUM. 150-046-055-01-001 APPRAISED VALUE AS OF OCTOBER 3, 2013	Fee simple	\$220,000.00	Appraised Value	\$220,000.00

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (If known)

55.5. COMMERCIAL BUILDING LOCATED AT #205 MUÑOZ RIVERA STREET, FAJARDO, PUERTO RICO. CADASTER NUM. 150-046-050-14-001 APPRAISED VALUE AS OF JANUARY 30, 2012	Fee simple	\$730,000.00	Appraised Value	\$730,000.00
--	------------	--------------	-----------------	--------------

55.6. VACANT LOT USED AS PARKING FACILITIES, LOCATED AT CELIS AGUILERA STREET, FAJARDO, PUERTO RICO. CADASTER NUM. 150-046-050-08-001 APPRAISED VALUE AS OF JANUARY 30, 2012	Fee simple	\$44,000.00	Appraised Value	\$44,000.00
---	------------	-------------	-----------------	-------------

55.7. MIXED COMMERCIAL AND RESIDENTIAL BUILDING LOCATED AT LOT 610 OF FIGUEROA STREET, SANTURCE WARD, SAN JUAN, PUERTO RICO. CADASTER NUM. 040-059-034-12-001 APPRAISED VALUE AS OF JUNE 17, 2015	Fee simple	\$290,000.00	Appraised Value	\$290,000.00
--	------------	--------------	-----------------	--------------

56. Total of Part 9.

**\$6,764,000.00**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

57. Is a depreciation schedule available for any of the property listed in Part 9?

☐ No  
☒ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No  
☐ Yes

**Part 10: Intangibles and Intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

Debtor	<b>MBTI OF PUERTO RICO INC</b>			Case number (If known)	
	Name				
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest	
60.	Patents, copyrights, trademarks, and trade secrets				
61.	Internet domain names and websites				
62.	Licenses, franchises, and royalties				
63.	Customer lists, mailing lists, or other compilations				
64.	Other intangibles, or Intellectual property				
65.	Goodwill <b>GOODWILL</b> <b>BOOK VALUE AS OF AUGUST 31, 2016</b>	<b>\$0.00</b>	<b>SEE NOTE BELOW</b>	<b>\$0.00</b>	(1)

66. **Total of Part 10.**  
Add lines 60 through 65. Copy the total to line 89. **\$0.00**
67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 1077)  
☒ No  
☐ Yes
68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**  
☒ No  
☐ Yes
69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**  
☒ No  
☐ Yes

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**  
Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

Current value of  
debtor's interest

71. **Notes receivable**  
Description (include name of obligor)
72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)
73. **Interests in insurance policies or annuities**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** Examples: Season tickets, country club membership



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (If known)

**LEASEHOLD IMPROVEMENTS - BAYAMON LEASED  
FACILITIES  
AT COST**

**\$800,155.28**

**DEFERRED TAX ASSET (PURSUANT TO GAAP)  
BALANCE AS OF AUGUST 31, 2016**

**\$1,518,697.00**

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$2,318,852.28**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (If known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form  
Type of property

	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$1,227,072.74	
81. Deposits and prepayments. <i>Copy line 9, Part 2</i>	\$414,542.21	
82. Accounts receivable. <i>Copy line 12, Part 3</i>	\$439,521.92	
83. Investments. <i>Copy line 17, Part 4</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5</i>	\$225,468.47	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7</i>	\$1,564,422.49	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8</i>	\$46,000.00	
88. Real property. <i>Copy line 56, Part 9</i> >		\$6,764,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11</i>	+ \$2,318,852.28	
91. Total. Add lines 80 through 90 for each column	\$6,235,880.11	+ 91b: \$6,764,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$12,999,880.11

**MBTI OF PUERTO RICO, INC.**

**EXHIBIT I**

**SCHEDULE B - PERSONAL PROPERTY**

**PETTY CASH**

<u>DESCRIPTION</u>	<u>AMOUNT</u>
PETTY CASH - OFFICE	\$ 250.00
PETTY CASH - OFICINA DE COBROS	220.00
PETTY CASH - BAYAMON	500.00
PETTY CASH - BAYAMON RECAUDACIONES	100.00
PETTY CASH - BAYAMON RECAUDACIONES II	100.00
PETTY CASH - BAYAMON CAFES/CATERING	500.00
PETTY CASH - FAJARDO	1,000.00
PETTY CASH - FAJARDO RECAUDACIONES	100.00
PETTY CASH - SANTURCE	600.00
PETTY CASH - SANTURCE CAFES/CATERIN	500.00
PETTY CASH - MAYAGUEZ	1,000.00
PETTY CASH - MAYAGUEZ RECAUDACIONES	100.00
PETTY CASH - MAYAGUEZ CAFE/CATERING	500.00
PETTY CASH - COMPRA ADMINISTRACION	300.00
<b>TOTAL</b>	<b>\$ 5,770.00</b>

**MBTI OF PUERTO RICO, INC.**

**EXHIBIT II**

**SCHEDULE B - PERSONAL PROPERTY  
INVENTORIES**

<b><u>DESCRIPTION</u></b>	<b><u>AMOUNT</u></b>
BOOKS INVENTORY - SANTURCE	\$ 68,620.74
INVENTORY - COURSE MATERIALS	33,659.85
INVENTORY - CAFETERIA/CATERING SANTURCE	70,369.20
INVENTORY - CAFETERIA/CATERING BAYAMON	24,194.61
INVENTORY - CAFETERIA/CATERING FAJARDO	17,338.67
INVENTORY - CAFETERIA/CATERING MAYAGUEZ	11,285.40
<b>TOTAL</b>	<b><u>\$ 225,468.47</u></b>

**MBTI OF PUERTO RICO, INC.**

**EXHIBIT III**

**SCHEDULE B - PERSONAL PROPERTY**

**PRE-PAID EXPENSES**

<b><u>DESCRIPTION</u></b>	<b><u>AMOUNT</u></b>
PRE-PAID MUNICIPAL TAXES	\$ 23,981.16
PRE-PAID PROPERTY TAXES	74,682.63
PRE-PAID WORKERS' COMPENSATION	148,439.63
PRE-PAID INSURANCE	27,731.72
PRE-PAID EXPENSES - OTHERS	16,535.26
<b>TOTAL</b>	<b><u>\$ 291,370.40</u></b>

**MBTI OF PUERTO RICO, INC.**

**EXHIBIT IV**

**SCHEDULE B - PERSONAL PROPERTY**  
**SECURITY DEPOSITS**

<b><u>DESCRIPTION</u></b>	<b><u>AMOUNT</u></b>
SECURITY DEPOSITS - UTILITIES	\$ 13,219.12
SECURITY DEPOSITS - RENTS	59,468.00
SECURITY DEPOSITS - OTHERS	50,484.69
<b>TOTAL</b>	<b><u>\$ 123,171.81</u></b>



MBTI OF PUERTO RICO, INC.

EXHIBIT V

**SCHEDULE B - PERSONAL PROPERTY**

**OTHER ACCOUNTS RECEIVABLE**

<u>DESCRIPTION</u>	<u>GROSS AMOUNT</u>	<u>RESERVE FOR DOUBTFULL ACCOUNTS</u>	<u>NET AMOUNT</u>
ACCOUNTS RECEIVABLE - RETURNED CHECKS	\$ 1,640.85	\$ (1,640.85)	\$ -
ACCOUNTS RECEIVABLE - LOAN RECEIVABLE FROM STUDENTS (COOPERATIVAS)	1,274,567.61	(1,274,567.61)	-
ACCOUNTS RECEIVABLE - HACIENDA 7% WITHHOLDINGS	1,515.96	(1,515.96)	-
DUE FROM EMPLOYEES	4,951.54	(4,951.54)	-
DUE FROM BARBARA ALONSO VILA	93,744.88	-	93,744.88
<b>TOTAL</b>	<b>\$ 1,376,420.84</b>	<b>\$ (1,282,675.96)</b>	<b>\$ 93,744.88</b>

Fill in this information to identify the case:

Debtor name **MBTI OF PUERTO RICO INC**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known)

☐ Check if this is an amended filing

Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	

2.1 **COOP DE AHORRO Y CREDITO DE BARRANQUITAS**

Creditor's Name

**PO BOX 686  
Barranquitas, PR 00794**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/31/2014**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien  
**CERTIFICATE OF DEPOSIT**

**\$1,785,074.00**

**\$726,205.25**

Describe the lien  
**SECURITY LIEN OVER CERTIFICATE OF DEPOSIT**

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?
- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:  
Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

2.2 **CRIM**

Creditor's Name

**PO BOX 195387  
San Juan, PR 00919-5387**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/1/2016**

Describe debtor's property that is subject to a lien  
**COMMERCIAL BUILDING AT #1256 PONCE DE LEON AVENUE, CORNER RAMON FIGUEROA STREET, SANTURCE WARD, SAN JUAN, PUERTO RICO.  
CADASTER NUM. 040-059-034-10-901**

**\$10,543.79**

**\$2,200,000.00**

Describe the lien  
**REAL PROPERTY TAXES**

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?
- ☒ No
- ☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **MBTI OF PUERTO RICO INC**

Case number (if know)

Name

Last 4 digits of account number

**0901**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.3 CRIM**

Creditor's Name

**PO BOX 195387**

**San Juan, PR 00919-5387**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/1/2016**

Last 4 digits of account number

**2001**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**COMMERCIAL BUILDING AT 11 DE AGOSTO STREET, CORNER DR. BASORA, MAYAGUEZ, PUERTO RICO CADASTER NUM. 233-058-341-02-001**

**\$6,043.10**

**\$3,100,000.00**

Describe the lien

**REAL PROPERTY TAXES**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.4 CRIM**

Creditor's Name

**PO BOX 195387**

**San Juan, PR 00919-5387**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/1/2016**

Last 4 digits of account number

**3901**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**RESIDENTIAL PROPERTY AT #1654 SANTA ANA STREET, SANTURCE WARD, SAN JUAN, PUERTO RICO. CADASTER NUM. 040-080-052-03-901**

**\$1,107.34**

**\$180,000.00**

Describe the lien

**REAL PROPERTY TAXES**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.5 CRIM**

Describe debtor's property that is subject to a lien

**\$187.24**

**\$44,000.00**

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if know)

Creditor's Name

**PO BOX 195387**  
**San Juan, PR 00919-5387**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/1/2016**

Last 4 digits of account number

**8001**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

**VACANT LOT USED AS PARKING FACILITIES, LOCATED AT CELIS AGUILERA STREET, FAJARDO, PUERTO RICO. CADASTER NUM. 150-046-050-08-001**

Describe the lien

**REAL PROPERTY TAXES**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.6 CRIM**

Creditor's Name

**PO BOX 195387**  
**San Juan, PR 00919-5387**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**7/1/2016**

Last 4 digits of account number

**1001**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien  
**COMMERCIAL BUILDING AT LOT 164 OF MUÑOZ RIVERA STREET, FAJARDO, PUERTO RICO. CADASTER NUM. 150-046-055-01-001**

**\$2,767.33**

**\$220,000.00**

Describe the lien

**REAL PROPERTY TAXES**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.7 MERCEDES BENZ FINANCIAL SERV**

Creditor's Name

**PO BOX 5209**  
**Carol Stream, IL 60197-5209**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**4/24/2015**

Describe debtor's property that is subject to a lien

**2015 MERCEDES ML350  
SERIAL NUM. 4JGDA55JB6FA577190  
ESTIMATED FAIR MARKET VALUE**

**\$83,799.37**

**\$46,000.00**

Describe the lien

**LOAN SECURED BY VEHICLE**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **MBTI OF PUERTO RICO INC**

Case number (if know)

Name

Last 4 digits of account number

6001

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.8 ORIENTAL BANK**

Creditor's Name

PO BOX 195115

San Juan, PR 00919-5115

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

9/7/2012

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**REAL PROPERTIES LISTED IN SCHEDULE A**

**\$5,894,179.93**

**\$6,764,000.00**

Describe the lien

**FIRST MORTGAGE OVER REAL PROPERTIES (REFER TO EXHIBIT VI FOR DETAIL)**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.9 ORIENTAL BANK**

Creditor's Name

PO BOX 195115

San Juan, PR 00919-5115

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

5/31/2016

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**REAL PROPERTIES LISTED IN SCHEDULE A**

**\$2,845,000.00**

**\$869,820.07**

Describe the lien

**MORTGAGES OVER REAL PROPERTIES**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**\$10,628,702.**

**10**

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies,

Official Form 206D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 4 of 5

**MBTI OF PUERTO RICO, INC.**

**EXHIBIT VI**

**SCHEDULE D - SECURED CREDITORS**

**ORIENTAL BANK**

<b><u>DESCRIPTION</u></b>	<b><u>AMOUNT</u></b>
ACCOUNT/NOTE NUMBER 00001569385-00009	\$ 963,213.65
ACCOUNT/NOTE NUMBER 00001569385-00008	1,170,711.75
ACCOUNT/NOTE NUMBER 00001569385-00010	340,136.20
ACCOUNT/NOTE NUMBER 00001569385-00011	78,626.55
ACCOUNT/NOTE NUMBER 00001569385-00021	286,666.75
ACCOUNT/NOTE NUMBER 00001569385-00022	209,825.03
ACCOUNT/NOTE NUMBER 00001569385-00101	1,000,000.00
ACCOUNT/NOTE NUMBER 00001569385-00100	1,000,000.00
ACCOUNT/NOTE NUMBER 00001569385-00024	345,000.00
ACCOUNT/NOTE NUMBER 00001569385-00023	500,000.00
<b>TOTAL</b>	<b>\$ 5,894,179.93</b>



Debtor **MBTI OF PUERTO RICO INC**

Case number (if know)

Name

assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did  
you enter the related creditor?

Last 4 digits of  
account number for  
this entity

Fill in this information to identify the case:

Debtor name **MBTI OF PUERTO RICO INC**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

2.1 Priority creditor's name and mailing address  
**DEPARTMENT OF TREASURY OF  
PUERTO RICO  
PO BOX 9024140  
OFFICE 424 B  
San Juan, PR 00902-4140**

Date or dates debt was incurred  
**7/11/2016**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**7% TAX WITHHELD, CODE (400)**

Is the claim subject to offset?

☒ No  
☐ Yes

**\$23,374.31 \$23,374.31**

2.2 Priority creditor's name and mailing address  
**DEPARTMENT OF TREASURY OF  
PUERTO RICO  
PO BOX 9024140  
OFFICE 424 B  
San Juan, PR 00902-4140**

Date or dates debt was incurred

**7/1/2016**

Last 4 digits of account number

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**SALES AND USE TAXES (IVU), CODE (550)  
VARIOUS PERIODS**

Is the claim subject to offset?

☒ No  
☐ Yes

**Unknown Unknown**

Debtor	MBTI OF PUERTO RICO INC	Case number (if known)		
2.3	Priority creditor's name and mailing address <b>DEPARTMENT OF TREASURY OF PUERTO RICO</b> <b>PO BOX 9024140 OFFICE 424 B</b> <b>OFFICE 424 B</b> <b>San Juan, PR 00902-4140</b> Date or dates debt was incurred <b>7/1/2016</b> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>PAYROLL TAXES, CODE (300)</b> <b>VARIOUS PERIODS (ESTIMATED)</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$260,000.00</b>	<b>\$260,000.00</b>
2.4	Priority creditor's name and mailing address <b>DEPTO DEL TRABAJO Y RECURSOS HUMANOS</b> <b>PO BOX 195540</b> <b>San Juan, PR 00919-5540</b> Date or dates debt was incurred <b>7/1/2016</b> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SPECIAL ASSESMENT, DISABILITY, AND UNEMPLOYMENT INSURANCE WITHHELD</b> <b>VARIOUS PERIODS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>	<b>Unknown</b>
2.5	Priority creditor's name and mailing address <b>INTERNAL REVENUE SERVICE</b> <b>PO BOX 7346</b> <b>Philadelphia, PA 19101-7346</b> Date or dates debt was incurred <b>7/1/2016</b> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>PAYROLL TAXES</b> <b>VARIOUS PERIODS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>	<b>Unknown</b>
2.6	Priority creditor's name and mailing address <b>MUNICIPIO DE BAYAMON</b> <b>PO BOX 1588</b> <b>Bayamon, PR 00960</b> Date or dates debt was incurred <b>7/1/2016</b> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>MUNICIPAL TAXES (PATENT)</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>	<b>Unknown</b>

Debtor **MBTI OF PUERTO RICO INC**

Case number (if known)

Name

2.7 Priority creditor's name and mailing address  
**MUNICIPIO DE FAJARDO**  
**PO BOX 865**  
**Fajardo, PR 00738-0865**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Unknown Unknown

Date or dates debt was incurred  
**7/1/2016**

Basis for the claim:

**MUNICIPAL TAXES (PATENT)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

2.8 Priority creditor's name and mailing address  
**MUNICIPIO DE MAYAGUEZ**  
**PO BOX 447**  
**Mayaguez, PR 00681-0447**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Unknown Unknown

Date or dates debt was incurred  
**7/1/2016**

Basis for the claim:

**MUNICIPAL TAXES (PATENT)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

2.9 Priority creditor's name and mailing address  
**MUNICIPIO DE SAN JUAN**  
**PO BOX 70179**  
**San Juan, PR 00917**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Unknown Unknown

Date or dates debt was incurred  
**7/1/2016**

Basis for the claim:

**MUNICIPAL TAXES (PATENT)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

2.10 Priority creditor's name and mailing address  
**STATE INSURANCE FUND**  
**CORPORATION**  
**PO BOX 365028**  
**San Juan, PR 00936-5028**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$23,000.00 \$23,000.00

Date or dates debt was incurred  
**7/20/2016**

Basis for the claim:

**WORKMEN COMPENSATION (ESTIMATED)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims:**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

**2.7** Priority creditor's name and mailing address  
**MUNICIPIO DE FAJARDO**  
**PO BOX 865**  
**Fajardo, PR 00738-0865**

As of the petition filing date, the claim is:  
*Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

Unknown Unknown

Date or dates debt was incurred  
**7/1/2016**

Basis for the claim:  
**MUNICIPAL TAXES (PATENT)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No  
☐ Yes

**2.8** Priority creditor's name and mailing address  
**MUNICIPIO DE MAYAGUEZ**  
**PO BOX 447**  
**Mayaguez, PR 00681-0447**

As of the petition filing date, the claim is:  
*Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

Unknown Unknown

Date or dates debt was incurred  
**7/1/2016**

Basis for the claim:  
**MUNICIPAL TAXES (PATENT)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No  
☐ Yes

**2.9** Priority creditor's name and mailing address  
**MUNICIPIO DE SAN JUAN**  
**PO BOX 70179**  
**San Juan, PR 00917**

As of the petition filing date, the claim is:  
*Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

Unknown Unknown

Date or dates debt was incurred  
**7/1/2016**

Basis for the claim:  
**MUNICIPAL TAXES (PATENT)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No  
☐ Yes

**2.10** Priority creditor's name and mailing address  
**STATE INSURANCE FUND**  
**CORPORATION**  
**PO BOX 365028**  
**San Juan, PR 00936-5028**

As of the petition filing date, the claim is:  
*Check all that apply.*  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$23,000.00 \$23,000.00

Date or dates debt was incurred  
**7/20/2016**

Basis for the claim:  
**WORKMEN COMPENSATION (ESTIMATED)**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No  
☐ Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> <b>A AND A EMPLOYEE BENEFIT CONSULTING CORP</b> <b>PO BOX 13928</b> <b>San Juan, PR 00908-3928</b> Date(s) debt was incurred <u>8/18/2015</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: CONSULTING SERVICES</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,525.00</b>
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> <b>AA ENVIRONMENTAL SERVICES</b> <b>PMB 548</b> <b>CALL BOX 20000</b> <b>Canovanas, PR 00729</b> Date(s) debt was incurred <u>4/5/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: REPAIRS AND MAINTENANCE SERVICES</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,763.10</b>
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> <b>ACADEMIC EMBLEMS SPECIALTIES</b> <b>PO BOX 3650</b> <b>AVE UNIVERSIDAD ESQ ESTEBAN GONZALEZ</b> <b>Guaynabo, PR 00970-3650</b> Date(s) debt was incurred <u>1/15/2015</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: OFFICE SUPPLIES</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$410.57</b>
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> <b>ADOLFO CORREA ACOSTA</b> <b>ESTANCIAS LA FUENTE</b> <b>CALLE LIRIO 38</b> <b>Toa Alta, PR 00953</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> <b>ADRENALINE ADVERTISING CORP</b> <b>PO BOX 16262</b> <b>San Juan, PR 00908-6262</b> Date(s) debt was incurred <u>12/31/2014</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim: ADVERTISING SERVICES</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$983,479.66</b>
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> <b>AFLAC</b> <b>WORLDWIDE HEADQUARTERS</b> <b>Columbus, GA 31999</b> Date(s) debt was incurred <u>4/1/2016</u> Last 4 digits of account number <u>NB55</u>	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: DISABILITY INSURANCE (EMPLOYEES)</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,059.70</b>
<b>3.7</b>	<b>Nonpriority creditor's name and mailing address</b> <b>AGRO PRODUCE PUERTO RICO INC</b> <b>PO BOX 11908</b> <b>San Juan, PR 00922-1908</b> Date(s) debt was incurred <u>6/10/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: GROCERIES</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,827.96</b>



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.8 Nonpriority creditor's name and mailing address

**ALEX EVENTS CORP**  
**HC 15 BOX 16020**  
**Humacao, PR 00791**

Date(s) debt was incurred 12/2/2015

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$25,272.00**

Basis for the claim: DESIGN AND COORDINATION SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.9 Nonpriority creditor's name and mailing address

**ALFONSO PIZARRO RAMIREZ**  
**URB LA RAMBLA**  
**1275 CALLE CLARISA**  
**Ponce, PR 00730**

Date(s) debt was incurred 12/23/2015

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$360.00**

Basis for the claim: PROMOTION SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.10 Nonpriority creditor's name and mailing address

**ALLIED WASTE SERVICES**  
**PO BOX 51986**  
**Toa Baja, PR 00950-1986**

Date(s) debt was incurred 6/30/2016

Last 4 digits of account number 3262

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$959.09**

Basis for the claim: WASTE DISPOSAL SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.11 Nonpriority creditor's name and mailing address

**AMERICAN PAPER**  
**AMELIA INDUSTRIAL PARK**  
**26 CALLE EMMA**  
**Guaynabo, PR 00968-8007**

Date(s) debt was incurred 5/5/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$4,708.16**

Basis for the claim: OFFICE SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

3.12 Nonpriority creditor's name and mailing address

**ANGEL NEGRON CANDELARIA**  
**UNKNOWN**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$60.00**

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.13 Nonpriority creditor's name and mailing address

**AOR BUILDING SUPPLIES**  
**PO BOX 13606**  
**San Juan, PR 00908-3606**

Date(s) debt was incurred 6/8/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$82.40**

Basis for the claim: MAINTENANCE SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

3.14 Nonpriority creditor's name and mailing address

**AQUAPURE**  
**URB VILLAS DE PARANA S 1 2**  
**CALLE 11**  
**San Juan, PR 00926-6045**

Date(s) debt was incurred 11/1/2015

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$702.45**

Basis for the claim: WATER

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.15	Nonpriority creditor's name and mailing address <b>ARMANDO RODRIGUEZ RANGEL</b> <b>H-60 CALLE DOMINICO</b> <b>ALTOS DE TORRIMAR</b> <b>Bayamon, PR 00959</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60.00</b>
3.16	Nonpriority creditor's name and mailing address <b>ASUME</b> <b>PO BOX 70376</b> <b>San Juan, PR 00936-8376</b> Date(s) debt was incurred <u>8/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CHILD SUPPORT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,199.14</b>
3.17	Nonpriority creditor's name and mailing address <b>ATLANTIC MASTER PARKING SERV INC</b> <b>PMB SUITE 442</b> <b>AVE RIO HONDO</b> <b>Bayamon, PR 00961-3105</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PARKING RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$401.40</b>
3.18	Nonpriority creditor's name and mailing address <b>AUTOMOTIVE RENTAL INC</b> <b>PO BOX 5039</b> <b>Mount Laurel, NJ 08054</b> Date(s) debt was incurred <u>5/26/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>VEHICLE RENTAL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,765.37</b>
3.19	Nonpriority creditor's name and mailing address <b>AUTORIDAD DE ACUEDUCTOS Y</b> <b>ALCANTARILLADO</b> <b>PO BOX 70101</b> <b>San Juan, PR 00936-8101</b> Date(s) debt was incurred <u>7/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>WATER SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,204.05</b>
3.20	Nonpriority creditor's name and mailing address <b>AUTORIDAD DE ENERGIA ELECTRICA</b> <b>PO BOX 363508</b> <b>San Juan, PR 00936-3508</b> Date(s) debt was incurred <u>7/5/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ELECTRIC POWER SERVICE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$134,142.73</b>
3.21	Nonpriority creditor's name and mailing address <b>BALLESTER HERMANOS INC</b> <b>PO BOX 364548</b> <b>San Juan, PR 00936-4548</b> Date(s) debt was incurred <u>5/20/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>GROCERIES (CAFETERIA)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,469.52</b>

Debtor <b>MBTI OF PUERTO RICO INC</b>		Case number (if known)
Name		
<b>3.22</b>	Nonpriority creditor's name and mailing address <b>BANCO POPULAR DE PR</b> <b>PO BOX 70100</b> <b>San Juan, PR 00936-8100</b> Date(s) debt was incurred <u>6/13/2014</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$25,333.29</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CREDIT CARD - VISA</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.23</b>	Nonpriority creditor's name and mailing address <b>BETANCES PROFESSIONAL SERVICES AND EQUIP</b> <b>URB. SAN FERNANDO F 11</b> <b>AVE BETANCES</b> <b>Bayamon, PR 00957</b> Date(s) debt was incurred <u>4/13/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$1,103.88</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SCHOOL SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.24</b>	Nonpriority creditor's name and mailing address <b>BOQUERON BEACH HOTEL</b> <b>PO BOX 498</b> <b>Boqueron, PR 00622</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$1,050.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PARKING RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.25</b>	Nonpriority creditor's name and mailing address <b>BORBON FOODS LLC</b> <b>200 RAFAEL CORDERO</b> <b>AVE STE 140 PMB 320</b> <b>Caguas, PR 00725</b> Date(s) debt was incurred <u>7/5/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$644.92</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOOD SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.26</b>	Nonpriority creditor's name and mailing address <b>BRENDA I RODRIGUEZ NEGRON</b> <b>HC 01 BOX 3904</b> <b>Hormigueros, PR 00660</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$60.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.27</b>	Nonpriority creditor's name and mailing address <b>CABO ROJO GAS INC</b> <b>PO BOX 883</b> <b>CALLE MUNOZ RIVERA 29</b> <b>Cabo Rojo, PR 00623</b> Date(s) debt was incurred <u>5/7/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$683.06</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PROPANE GAS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.28</b>	Nonpriority creditor's name and mailing address <b>CADILLAC UNIFORMS AND LINEN SUPPLY</b> <b>IND MINILLAS 221</b> <b>AVE LAUREL</b> <b>Bayamon, PR 00959-1908</b> Date(s) debt was incurred <u>4/26/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$1,612.75</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LAUNDRY SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.29 Nonpriority creditor's name and mailing address

**CAMERA MUNDI INC**  
**PO BOX 6860**  
**Caguas, PR 00726**

Date(s) debt was incurred 6/3/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SCHOOL SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

\$55.64

3.30 Nonpriority creditor's name and mailing address

**CARIBBEAN FOOD PRODUCTS CORP**  
**PO BOX 244**  
**Puerto Real, PR 00740-0244**

Date(s) debt was incurred 6/23/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOOD SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

\$1,011.96

3.31 Nonpriority creditor's name and mailing address

**CARIBBEAN STONE PRODUCTS**  
**PO BOX 86**  
**Vega Baja, PR 00694**

Date(s) debt was incurred 5/11/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SURGICAL AND MEDICAL INSTRUMENTS

Is the claim subject to offset? ☒ No ☐ Yes

\$94.19

3.32 Nonpriority creditor's name and mailing address

**CARIBBEAN WATER COOLER**  
**PO BOX 9505**  
**San Juan, PR 00908-0505**

Date(s) debt was incurred 2/1/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: WATER SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

\$478.00

3.33 Nonpriority creditor's name and mailing address

**CARIBE FINE FOODS**  
**PO BOX 10585**  
**San Juan, PR 00922**

Date(s) debt was incurred 5/5/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOOD SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

\$98.52

3.34 Nonpriority creditor's name and mailing address

**CARIMAR NIEVES**  
**URB REXVILLE**  
**CALLE 23 A CF 25**  
**Bayamon, PR 00957**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

\$60.00

3.35 Nonpriority creditor's name and mailing address

**CARLOS FORTIER MELENDEZ**  
**VILLA CAROLINA**  
**CALLE 435 BLQ 192 NUM 22**  
**Carolina, PR 00985**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

\$35.00

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.36</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CENGAGE LEARNING</b> <b>PO BOX 95999</b> <b>Chicago, IL 60694-5999</b>  Date(s) debt was incurred <u>3/15/2016</u> Last 4 digits of account number <u>3575</u>	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>TEXTBOOKS AND PUBLISHING SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,804.79</b>
<b>3.37</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CENTRO DE SERVICIOS DE SALUD DE BAYAMON</b> <b>AVE LOMAS VERDES IF 48</b> <b>Bayamon, PR 00956</b>  Date(s) debt was incurred <u>6/21/2016</u> Last 4 digits of account number _	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>HEALTH AND CONSULTING SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,705.00</b>
<b>3.38</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CENTRO EDUCACION SECUNDARIA ACELERADA</b> <b>PO BOX 2836</b> <b>Rio Grande, PR 00745</b>  Date(s) debt was incurred <u>5/3/2016</u> Last 4 digits of account number _	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EDUCATION SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,125.00</b>
<b>3.39</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CH SOUND</b> <b>CALLE EL TREN 142</b> <b>LA PUNTILLA</b> <b>Catano, PR 00962</b>  Date(s) debt was incurred <u>6/29/2016</u> Last 4 digits of account number _	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>PROMOTION SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,200.00</b>
<b>3.40</b>	<b>Nonpriority creditor's name and mailing address</b> <b>COCA COLA PUERTO RICO BOTTLERS</b> <b>PO BOX 51985</b> <b>Toa Baja, PR 00950-1985</b>  Date(s) debt was incurred <u>6/1/2016</u> Last 4 digits of account number _	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>BEVERAGES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,116.10</b>
<b>3.41</b>	<b>Nonpriority creditor's name and mailing address</b> <b>COLEGIO ACELERADO EDUCACION SECUNDARIA</b> <b>URB.COUNTRY CLUB</b> <b>AVE CAMPO RICO GL 25</b> <b>Carolina, PR 00985</b>  Date(s) debt was incurred <u>5/13/2016</u> Last 4 digits of account number _	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EDUCATION SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,720.00</b>
<b>3.42</b>	<b>Nonpriority creditor's name and mailing address</b> <b>COMFORT AIR ZONE</b> <b>PO BOX 10</b> <b>Dorado, PR 00646</b>  Date(s) debt was incurred <u>3/5/2016</u> Last 4 digits of account number _	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>AIR CONDITIONING MAINTENANCE SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$190.00</b>



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.43</b>	<b>Nonpriority creditor's name and mailing address</b> <b>COMNET TECHNOLOGY GROUP</b> <b>C 535 VIZCAYA 3 10</b> <b>Carolina, PR 00985-2301</b>  Date(s) debt was incurred <u>5/17/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>COMPUTER SYSTEMS DESIGN</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$513.18</b>
<b>3.44</b>	<b>Nonpriority creditor's name and mailing address</b> <b>COMPUTER LINK</b> <b>PO BOX 193724</b> <b>San Juan, PR 00919</b>  Date(s) debt was incurred <u>5/16/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>NETWORKING AND COMPUTER MAINTENANCE SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$423.71</b>
<b>3.45</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CONCORDE METRO SEGUROS LLC</b> <b>PO BOX 362708</b> <b>San Juan, PR 00936-2708</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>RENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$112,978.37</b>
<b>3.46</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CONSOLIDATED WASTE SERV CORP</b> <b>PO BOX 1322</b> <b>Gurabo, PR 00778-1319</b>  Date(s) debt was incurred <u>5/31/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>WASTE DISPOSAL SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$111.51</b>
<b>3.47</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CONSTRUCTION &amp; COMUNICATIONS CONTRACTORS</b> <b>RR-10 BOX 10225 B</b> <b>San Juan, PR 00926-9513</b>  Date(s) debt was incurred <u>4/8/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>MAINTENANCE SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$338.00</b>
<b>3.48</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CRISTIAN MARRERO</b> <b>URB PONCE DE LEON</b> <b>CALLE 23 NUM 246</b> <b>Guaynabo, PR 00969</b>  Date(s) debt was incurred <u>3/28/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>CPR WORKSHOP</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$910.00</b>
<b>3.49</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CRISTINA ROSADO SILVA</b> <b>PO BOX 985</b> <b>Rincon, PR 00677</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EMPLOYEE EXPENSES REIMBURSEMENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60.00</b>

Debtor <b>MBTI OF PUERTO RICO INC</b>		Case number (if known) _____	
Name _____			
3.50	Nonpriority creditor's name and mailing address <b>CSI LEASING PUERTO RICO INC</b> <b>METRO OFFICE PARK 7</b> <b>SUITE 204 OFICINA 205</b> <b>Guaynabo, PR 00968</b> Date(s) debt was incurred <u>9/1/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,387.18</b>
3.51	Nonpriority creditor's name and mailing address <b>CT CORPORATION</b> <b>PO BOX 4349</b> <b>Carol Stream, IL 60197-4349</b> Date(s) debt was incurred <u>8/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SECURITY SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$380.00</b>
3.52	Nonpriority creditor's name and mailing address <b>DADE PAPER</b> <b>PO BOX 51535</b> <b>Toa Baja, PR 00950-1535</b> Date(s) debt was incurred <u>6/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CLEANING SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,912.65</b>
3.53	Nonpriority creditor's name and mailing address <b>DATA ACCESS</b> <b>316 AVE CONSTITUCION</b> <b>SUITE 100</b> <b>San Juan, PR 00901</b> Date(s) debt was incurred <u>3/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NETWORK MAINTENANCE SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$59,682.40</b>
3.54	Nonpriority creditor's name and mailing address <b>DATA TEK</b> <b>AVENIDA CONSTITUCION NUM 316</b> <b>San Juan, PR 00901</b> Date(s) debt was incurred <u>3/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SOFTWARE AND COMPUTERS EQUIPMENT CONSULTING SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,120.00</b>
3.55	Nonpriority creditor's name and mailing address <b>DEL RIO TRADING AND BEAUTY SUPPLY</b> <b>PO BOX 779</b> <b>Camuy, PR 00627</b> Date(s) debt was incurred <u>6/20/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BEAUTY PRODUCTS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$108,732.55</b>
3.56	Nonpriority creditor's name and mailing address <b>DEL VALLE AND ASOC CORP</b> <b>HC 10 BOX 49401</b> <b>Caguas, PR 00725</b> Date(s) debt was incurred <u>2/23/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ACCOUNTING AND AUDITING SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$48,186.64</b>

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.57 Nonpriority creditor's name and mailing address  
**DEPORTES SALVADOR COLOM**  
**PO BOX 9235**  
**San Juan, PR 00908-0235**  
Date(s) debt was incurred 5/17/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$65.56**

Basis for the claim: SPORTS UNIFORMS AND EQUIPMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.58 Nonpriority creditor's name and mailing address  
**DEYA ELEVATOR SERVICES INC**  
**PO BOX 362411**  
**San Juan, PR 00936-2411**  
Date(s) debt was incurred 4/21/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$2,787.50**

Basis for the claim: ELEVATOR MAINTENANCE SERVICE

Is the claim subject to offset? ☒ No ☐ Yes

3.59 Nonpriority creditor's name and mailing address  
**DIEGO MONTANEZ SANCHEZ**  
**PO BOX 340**  
**Puerto Real, PR 00740**  
Date(s) debt was incurred 2/2/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$503.10**

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.60 Nonpriority creditor's name and mailing address  
**DRA LOURDES MERCADO TORRES**  
**PO BOX 117**  
**Isabela, PR 00662**  
Date(s) debt was incurred 4/8/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$10,452.00**

Basis for the claim: MEDICAL SERVICES (VACCINES)

Is the claim subject to offset? ☒ No ☐ Yes

3.61 Nonpriority creditor's name and mailing address  
**DUNAMIS CONTROL SERVICE INC**  
**HC 02 BOX 6328**  
**Lares, PR 00669**  
Date(s) debt was incurred 3/11/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$500.00**

Basis for the claim: PEST CONTROL SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.62 Nonpriority creditor's name and mailing address  
**ECOLAB MANUFACTURING INC**  
**PO BOX 607086**  
**Bayamon, PR 00960**  
Date(s) debt was incurred 3/7/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$1,472.12**

Basis for the claim: CLEANING SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

3.63 Nonpriority creditor's name and mailing address  
**EDDIES REFRIGERATION SERV**  
**CALLE GUAYAMA NUM 62**  
**San Juan, PR 00917**  
Date(s) debt was incurred 6/27/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$325.00**

Basis for the claim: MAINTENANCE SERVICES

Is the claim subject to offset? ☒ No ☐ Yes



Debtor **MBTI OF PUERTO RICO INC**

Case number (if known)

Name

3.64 Nonpriority creditor's name and mailing address

**EMPRESAS DE GAS CO., INC.  
PO BOX 1025  
Sabana Seca, PR 00952-1230**

Date(s) debt was incurred 4/18/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PROPANE GAS SUPPLIER

Is the claim subject to offset? ☒ No ☐ Yes

**\$3,168.90**

3.65 Nonpriority creditor's name and mailing address

**ERIC SANTIAGO  
BARRIO MAMEY CARR 933 KM 1 4  
Juncos, PR 00777**

Date(s) debt was incurred 5/23/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: AIR CONDITIONING MAINTENANCE SERVICE

Is the claim subject to offset? ☒ No ☐ Yes

**\$2,640.00**

3.66 Nonpriority creditor's name and mailing address

**ESCUELA VIRTUAL DE PUERTO RICO  
COND COBIANS PLAZA  
1607 AVE PONCE DE LEON APT PH7  
San Juan, PR 00909**

Date(s) debt was incurred 8/11/2015

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EDUCATIONAL SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

**\$120.00**

3.67 Nonpriority creditor's name and mailing address

**EUROAMERICANA DE EDICIONES CORP  
PO BOX 195697  
San Juan, PR 00919-5697**

Date(s) debt was incurred 12/3/2015

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: TEXTBOOKS

Is the claim subject to offset? ☒ No ☐ Yes

**\$842.00**

3.68 Nonpriority creditor's name and mailing address

**FERNANDO GARCIA SANTOS  
URB LEVITOWN  
DB 15 CALLE LAGO PATILLAS  
Toa Baja, PR 00949**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$60.00**

3.69 Nonpriority creditor's name and mailing address

**FIRE FOE INC  
PO BOX 4656  
Carolina, PR 00984**

Date(s) debt was incurred 11/10/2015

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SAFETY EQUIPMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$6,436.35**

3.70 Nonpriority creditor's name and mailing address

**FIRST SECURITY MILLENIUM CORP  
PO BOX 1977  
Bayamon, PR 00960-1977**

Date(s) debt was incurred 7/15/2015

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SECURITY SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$67,934.95**

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.71 Nonpriority creditor's name and mailing address  
**FRANKIE RODRIGUEZ**  
**RR 7 BOX 7535**  
**San Juan, PR 00926**  
Date(s) debt was incurred 11/1/2015  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$8,547.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: COMPUTER NETWORK MAINTENANCE SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.72 Nonpriority creditor's name and mailing address  
**FREDDY LOZADA NEGRON**  
**URB INMACULADA**  
**CALLE PADRE APONTE NUM 117**  
**Vega Alta, PR 00692**  
Date(s) debt was incurred 7/1/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$35.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.73 Nonpriority creditor's name and mailing address  
**GABRIEL RODRIGUEZ SANTIAGO**  
**REPARTO FLAMBOYAN**  
**C 7 CALLE CIPRES**  
**Mayaguez, PR 00680**  
Date(s) debt was incurred 7/1/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$35.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.74 Nonpriority creditor's name and mailing address  
**GARRIGA PAPER**  
**PO BOX 364862**  
**San Juan, PR 00936-4862**  
Date(s) debt was incurred 4/7/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$897.80**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: OFFICE SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

3.75 Nonpriority creditor's name and mailing address  
**GASPARDS DE PUERTO RICO**  
**PO BOX 838 CALLE JOSE D DIEGO**  
**251 BARRIO TOITA**  
**Cayey, PR 00737**  
Date(s) debt was incurred 1/13/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$10,984.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PROPANE GAS SUPPLIER

Is the claim subject to offset? ☒ No ☐ Yes

3.76 Nonpriority creditor's name and mailing address  
**GRAPHIC PRINTING**  
**PMB 325**  
**35 CALLE JUAN C BORBON SUITE 67**  
**Guaynabo, PR 00969-5375**  
Date(s) debt was incurred 2/29/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$11,699.11**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PRINTING SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.77 Nonpriority creditor's name and mailing address  
**GUARDIAN ELECTRONIC SECURITY SERV**  
**PO BOX 13966**  
**San Juan, PR 00908-3966**  
Date(s) debt was incurred 3/1/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$456.61**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SECURITY SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **MBTI OF PUERTO RICO INC**

Case number (if known)

3.78 Nonpriority creditor's name and mailing address  
**GUILLERMO RODRIGUEZ FIGUEROA**  
**URB VILLA UNIVERSITARIA**  
**CALLE 4 A 21**  
**Humacao, PR 00791**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$60.00**

3.79 Nonpriority creditor's name and mailing address  
**HASLER INC**  
**PO BOX 30193**  
**Tampa, FL 33630-3193**

Date(s) debt was incurred 2/2/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: POSTAGE EQUIPMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$3,326.62**

3.80 Nonpriority creditor's name and mailing address  
**HERA PRINTING CORP**  
**PO BOX 362370**  
**San Juan, PR 00936-2370**

Date(s) debt was incurred 1/11/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PRINTING SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$25,063.52**

3.81 Nonpriority creditor's name and mailing address  
**HLB PARISSI**  
**PO BOX 195607**  
**San Juan, PR 00918-4149**

Date(s) debt was incurred 1/11/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: ACCOUNTING SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$45,636.55**

3.82 Nonpriority creditor's name and mailing address  
**HOSTOS MEDICAL SERV**  
**PO BOX 1586**  
**Mayaguez, PR 00681**

Date(s) debt was incurred 4/21/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: MEDICAL SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$2,173.00**

3.83 Nonpriority creditor's name and mailing address  
**HUMBERTO VIDAL INC**  
**DIVISION LEGAL**  
**PO BOX 21480**  
**San Juan, PR 00928-1480**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: RENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,500.00**

3.84 Nonpriority creditor's name and mailing address  
**IDALI ARROYO RUIZ**  
**RR 02 BUZON 3789**  
**Anasco, PR 00610**

Date(s) debt was incurred 4/30/2016

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$31.82**

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.85</b>	Nonpriority creditor's name and mailing address <b>INTERACTIVE TECHNOLOGY</b> <b>470 AVE PONCE DE LEON</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred <u>7/11/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LIGHTING EQUIPMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,547.80</b>
<b>3.86</b>	Nonpriority creditor's name and mailing address <b>INTERIORES DEL OESTE INC</b> <b>PO BOX 3150</b> <b>Mayaguez, PR 00681-3150</b> Date(s) debt was incurred <u>7/22/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ACOUSTICAL CONTRACTORS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,070.40</b>
<b>3.87</b>	Nonpriority creditor's name and mailing address <b>INTERNAL REVENUE SERVICE</b> <b>PO BOX 7346</b> <b>Philadelphia, PA 19101-7346</b> Date(s) debt was incurred <u>10/31/2012</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CORPORATE INCOME TAX</u> <u>(10/31/2012 TAX RETURN)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$264,481.00</b>
<b>3.88</b>	Nonpriority creditor's name and mailing address <b>IRCON PR</b> <b>PO BOX 19600</b> <b>FERNANDEZ JUNCOS STATION</b> <b>San Juan, PR 00910-1600</b> Date(s) debt was incurred <u>11/2/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSULTING SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,233.61</b>
<b>3.89</b>	Nonpriority creditor's name and mailing address <b>ISRAEL LEBRON</b> <b>PUESTO V 22 23</b> <b>PLAZA DEL MERCADO</b> <b>Mayaguez, PR 00680</b> Date(s) debt was incurred <u>4/6/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOOD SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,367.80</b>
<b>3.90</b>	Nonpriority creditor's name and mailing address <b>JACKELINE LINARES</b> <b>PO BOX 70171</b> <b>PMB 138</b> <b>San Juan, PR 00936</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<b>3.91</b>	Nonpriority creditor's name and mailing address <b>JAYMAR NEGRON VALENTIN</b> <b>HC 01 BOX 4998</b> <b>Naguabo, PR 00718</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.92</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JB PLUMBING</b> <b>HC 1 BOX 5161</b> <b>Barranquitas, PR 00794</b>  Date(s) debt was incurred <u>7/6/2015</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>MAINTENANCE SERVICES</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$455.00</b>
<hr/>			
<b>3.93</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JEAN MARIE BATISTA GUZMAN</b> <b>COND GALLERY PLAZA</b> <b>103 AVE DE DIEGO APT 1007</b> <b>San Juan, PR 00911</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60.00</b>
<hr/>			
<b>3.94</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JOE AND VIC</b> <b>PO BOX 13502</b> <b>San Juan, PR 00908</b>  Date(s) debt was incurred <u>12/23/2015</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>KITCHEN EQUIPMENT</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,022.77</b>
<hr/>			
<b>3.95</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JORGE CASTILLO NEGRON</b> <b>110 MARGINAL</b> <b>APARTADO 15 A</b> <b>Bayamon, PR 00959</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<hr/>			
<b>3.96</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JORGE OTERO</b> <b>PLAZA MERCADO</b> <b>CALLE ROBERT LOCAL NUM 5</b> <b>San Juan, PR 00907</b>  Date(s) debt was incurred <u>6/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>GROCERIES (CAFETERIA)</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$217.66</b>
<hr/>			
<b>3.97</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JOSE GONZALEZ</b> <b>CALLE LAGUNA 171 A</b> <b>BARRIO ISRAEL</b> <b>San Juan, PR 00917</b>  Date(s) debt was incurred <u>5/19/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>ELECTRICAL TECHNICIAN</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$150.00</b>
<hr/>			
<b>3.98</b>	<b>Nonpriority creditor's name and mailing address</b> <b>JOSE GUZMAN GS EXHIBIT</b> <b>URB VILLAS DE SAN AGUSTIN</b> <b>CALLE 4 B-1</b> <b>Bayamon, PR 00959-2036</b>  Date(s) debt was incurred <u>3/9/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>MANAGEMENT CONSULTING SERVICES</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,550.00</b>

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.99	Nonpriority creditor's name and mailing address <b>JOSE MANUEL ESTRADA PAGANI</b> <b>VITALCOLON NUM 11</b> <b>San Sebastian, PR 00685</b> Date(s) debt was incurred <u>6/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PROFESSIONAL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$232.50</b>
3.100	Nonpriority creditor's name and mailing address <b>JOSE SANTIAGO INC</b> <b>PO BOX 191795</b> <b>San Juan, PR 00919-1795</b> Date(s) debt was incurred <u>5/4/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOOD SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31,510.25</b>
3.101	Nonpriority creditor's name and mailing address <b>JOSE W SUAREZ</b> <b>PO BOX 329</b> <b>Cabo Rojo, PR 00623</b> Date(s) debt was incurred <u>1/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ELECTRICAL TECHNICIAN</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$649.93</b>
3.102	Nonpriority creditor's name and mailing address <b>JUAN BENIQUEZ</b> <b>CALLE RASPINELL #909</b> <b>COUNTRY CLUB</b> <b>San Juan, PR 00924</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60.00</b>
3.103	Nonpriority creditor's name and mailing address <b>JUAN CARLOS INC</b> <b>PO BOX 439</b> <b>Loiza, PR 00772</b> Date(s) debt was incurred <u>7/31/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TRANSPORTATION SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$202,513.20</b>
3.104	Nonpriority creditor's name and mailing address <b>K R IMPORTS INC</b> <b>3105 TERRALINDA COURT</b> <b>Trujillo Alto, PR 00976</b> Date(s) debt was incurred <u>2/1/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>UNIFORMS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,682.21</b>
3.105	Nonpriority creditor's name and mailing address <b>KERAMER CORP</b> <b>CALLE SAN MARTIN NUM 70</b> <b>Guaynabo, PR 00968</b> Date(s) debt was incurred <u>12/18/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BEAUTY PRODUCTS SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$340.08</b>

Debtor <b>MBTI OF PUERTO RICO INC</b>		Case number (if known)
Name		
<b>3.106</b>	Nonpriority creditor's name and mailing address <b>KIDANY MUNET VELEZ</b> <b>AVE LOS FILTROS NUM 300</b> <b>BOULEVAR DEL RIO 1 APT H227</b> <b>Guaynabo, PR 00971</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$35.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.107</b>	Nonpriority creditor's name and mailing address <b>KIRSTY C MENDEZ RODRIGUEZ</b> <b>COND BELLEVIEW</b> <b>148 A CALLE 2</b> <b>Trujillo Alto, PR 00976</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$17.50</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.108</b>	Nonpriority creditor's name and mailing address <b>KODE TECHNOLOGIES PUERTO RICO INC</b> <b>MARIO JULIA IND PARK</b> <b>698 CALLE B STE 1</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred <u>5/4/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$2,096.64</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>COMPUTER EQUIPMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.109</b>	Nonpriority creditor's name and mailing address <b>KRISIA ABREU VELEZ</b> <b>HC 03 BOX 6272</b> <b>Humacao, PR 00791</b> Date(s) debt was incurred <u>3/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$44.48</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.110</b>	Nonpriority creditor's name and mailing address <b>KRISTOR ENTERPRISES INC</b> <b>3105 TERRALINDA COURT</b> <b>Trujillo Alto, PR 00976-3917</b> Date(s) debt was incurred <u>4/7/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$6,793.39</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>UNIFORMS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.111</b>	Nonpriority creditor's name and mailing address <b>LCDO JESUS BIRD SERRANO</b> <b>PO BOX 946</b> <b>CALLE GARRIDO MORALES 15</b> <b>Canovanas, PR 00729</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$10,010.88</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.112</b>	Nonpriority creditor's name and mailing address <b>LCDO LUIS A LOPEZ LOPEZ</b> <b>EDIF PARADICE CERAMICS</b> <b>932 AVE HOSTOS OFICINA A 1</b> <b>Mayaguez, PR 00680</b> Date(s) debt was incurred <u>10/1/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <b>\$11,176.48</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LEGAL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **MBTI OF PUERTO RICO INC**

Case number (if known) \_\_\_\_\_

Name

3.113 Nonpriority creditor's name and mailing address

**LEMRS CORP  
PMB 504 PO BOX 819  
Lares, PR 00669**

Date(s) debt was incurred 5/23/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: CONTINUED EDUCATION SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$350.00**

3.114 Nonpriority creditor's name and mailing address

**LIBRERIA LUNA  
URB OASIS GARDENS  
CALLE ARGENTINA A 18  
Guaynabo, PR 00969**

Date(s) debt was incurred 11/30/2015

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: TEXTBOOKS

Is the claim subject to offset? ☒ No ☐ Yes

**\$765.45**

3.115 Nonpriority creditor's name and mailing address

**LINDA M FIGUEROA  
COND TORRES DEL PARQUE SUR  
1700 AVE F MONTILLA APT1603  
Bayamon, PR 00956-3071**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$60.00**

3.116 Nonpriority creditor's name and mailing address

**LOURDES ACEVEDO  
HC 03 BOX 34555  
Aguadilla, PR 00603**

Date(s) debt was incurred 6/7/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EDUCATION SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,200.00**

3.117 Nonpriority creditor's name and mailing address

**MAFIBO REALTY INC  
PO BOX 1169  
Fajardo, PR 00738**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: RENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$24,000.00**

3.118 Nonpriority creditor's name and mailing address

**MANUEL FREJE ARCE INC  
CALL BOX 1904  
Toa Baja, PR 00950-1904**

Date(s) debt was incurred 4/11/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: ELECTRIC AND PLUMBING MATERIALS

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,084.42**

3.119 Nonpriority creditor's name and mailing address

**MANUEL MUNIZ ORTIZ  
PO BOX 9033  
San Juan, PR 00908**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: RENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,300.00**



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.120</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARANYELIZ FUENTES MEDINA</b> <b>PO BOX 289</b> <b>Palmer, PR 00721</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EMPLOYEE EXPENSES REIMBURSEMENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<b>3.121</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARIA BRITO LABOY</b> <b>5 EXT VILLA NAVARRO</b> <b>Maunabo, PR 00707</b>  Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EMPLOYEE EXPENSES REIMBURSEMENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$78.82</b>
<b>3.122</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARIA ESTRADA COLON</b> <b>HC 05 BOX 56945</b> <b>Mayaguez, PR 00680</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EMPLOYEE EXPENSES REIMBURSEMENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<b>3.123</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARILYN LEON</b> <b>CALLE FLOR DE PRIMAVERA</b> <b>407 RIVER GARDENS</b> <b>Canovanas, PR 00729</b>  Date(s) debt was incurred <u>3/31/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>CATERING SERVICES</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,173.37</b>
<b>3.124</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARLENE ROCHA IZQUIERDO</b> <b>UNKNOWN</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>RENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,700.00</b>
<b>3.125</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARTA MONTANEZ ORTIZ</b> <b>URB RAMIREZ DE ARELLANO</b> <b>CALLE CAMPECHE 34</b> <b>Mayaguez, PR 00682</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>EMPLOYEE EXPENSES REIMBURSEMENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<b>3.126</b>	<b>Nonpriority creditor's name and mailing address</b> <b>MARVIC PARKING SERVICES</b> <b>CALLE PERAL NUM 27</b> <b>Mayaguez, PR 00680</b>  Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>PARKING RENT</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,900.00</b>

Debtor <b>MBTI OF PUERTO RICO INC</b>		Case number (if known)
Name		
3.127	Nonpriority creditor's name and mailing address <b>MAYAGUEZ PARKING CENTRO ENSANCHE RAMIREZ NUM 262 CALLE MIRAMAR Mayaguez, PR 00682-6208</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$2,700.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PARKING RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.128	Nonpriority creditor's name and mailing address <b>MENACO CORPORATION PO BOX 70183 San Juan, PR 00936-8183</b> Date(s) debt was incurred <u>2/10/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$14,088.70</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>JANITORIAL SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.129	Nonpriority creditor's name and mailing address <b>MIC CORPORATION PO BOX 19600 FERNANDO JUNCOS STA San Juan, PR 00910-1600</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$36,000.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.130	Nonpriority creditor's name and mailing address <b>MIGDALIA ILLAS URB VILLAS DE LOIZA CALLE 12 P 38 Canovanas, PR 00729</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$60.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.131	Nonpriority creditor's name and mailing address <b>MILLIE C ROSA PADUA URB RIVER VALLEY 5323 CALLE CANOVANAS Canovanas, PR 00729</b> Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$180.40</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132	Nonpriority creditor's name and mailing address <b>MQ SOUND REPARTO LAS DELICIAS NUM 7 CARR NUM 102 KM 38 2 San German, PR 00683</b> Date(s) debt was incurred <u>6/20/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$2,625.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SOUND AND LIGHT EQUIPMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address <b>MR TODD LLC MIRAMAR PLAZA CENTER 954 AVE PONCE DE LEON SUITE 204 San Juan, PR 00908</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <b>\$27,000.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PARKING RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **MBTI OF PUERTO RICO INC**

Case number (if known)

3.134	Nonpriority creditor's name and mailing address <b>MULTISYSTEMS</b> PO BOX 191938 San Juan, PR 00919-1938 Date(s) debt was incurred <u>4/11/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EQUIPMENT REPAIRS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$295.48</b>
3.135	Nonpriority creditor's name and mailing address <b>NALDITOS BUS LINE INC</b> PO BOX 2 Sabana Grande, PR 00637 Date(s) debt was incurred <u>10/31/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TRANSPORTATION SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$175,480.00</b>
3.136	Nonpriority creditor's name and mailing address <b>NATIONAL LIFE INSURANCE COMPANY</b> PO BOX 366107 San Juan, PR 00936-6107 Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number <u>8000</u>	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LIFE INSURANCE (EMPLOYEES)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$295.46</b>
3.137	Nonpriority creditor's name and mailing address <b>NEOPOST USA INC</b> 25880 NETWORK PLACE Chicago, IL 60673-1258 Date(s) debt was incurred <u>3/17/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>MAILING SOLUTIONS AND SHIPING SOFTWARE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$880.38</b>
3.138	Nonpriority creditor's name and mailing address <b>NOEL PAMIAS</b> PO BOX 772 Carolina, PR 00986-0772 Date(s) debt was incurred <u>3/4/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PEST CONTROL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,696.27</b>
3.139	Nonpriority creditor's name and mailing address <b>NOELVIS SAEZ CASTANEDA</b> ATLANTIC VIEW 161 VENUS Carolina, PR 00979 Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$134.92</b>
3.140	Nonpriority creditor's name and mailing address <b>OFFICE BUDDIES</b> PO BOX 589 Guaynabo, PR 00970 Date(s) debt was incurred <u>4/15/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>OFFICE SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,069.89</b>

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

**3.141** Nonpriority creditor's name and mailing address

**OLGA LEON COLON**  
**ESTABCIAS SAN PEDRO**  
**I 52 SAN LUCAS**  
**Fajardo, PR 00738**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$35.00**

**3.142** Nonpriority creditor's name and mailing address

**ORIENTAL BANK**  
**PO BOX 195115**  
**San Juan, PR 00919-5115**

Date(s) debt was incurred 5/25/2015

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: CREDIT CARD

Is the claim subject to offset? ☒ No ☐ Yes

**\$37,472.77**

**3.143** Nonpriority creditor's name and mailing address

**ORIENTAL BANK**  
**PO BOX 195115**  
**San Juan, PR 00919-5115**

Date(s) debt was incurred 1/29/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: RETIREMENT PLAN MANAGEMENT FEES

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,500.00**

**3.144** Nonpriority creditor's name and mailing address

**ORLANDO CLARK COLON**  
**URB ALTURAS DE SAN PEDRO**  
**CALLE SAN CRISTOBAL R 34**  
**Fajardo, PR 00738**

Date(s) debt was incurred 5/31/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$20.64**

**3.145** Nonpriority creditor's name and mailing address

**ORLANDO NATERA PENA**  
**CALLE LOIZA 11903**  
**San Juan, PR 00911**

Date(s) debt was incurred 2/28/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: CATERING SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

**\$1,515.00**

**3.146** Nonpriority creditor's name and mailing address

**PABLO GUADALUPE MENDOZA**  
**VISTAS DE LUQUILLO II**  
**305 CALLE DIAMANTE H 2**  
**Luquillo, PR 00773**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$35.00**

**3.147** Nonpriority creditor's name and mailing address

**PEARSON EDUCATION**  
**PO BOX 366408**  
**San Juan, PR 00936-6408**

Date(s) debt was incurred 5/12/2016

Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: TEXTBOOKS

Is the claim subject to offset? ☒ No ☐ Yes

**\$284.28**



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.148	Nonpriority creditor's name and mailing address <b>PITNEY BOWES PUERTO RICO INC</b> <b>PO BOX 11662</b> <b>San Juan, PR 00922-1662</b> Date(s) debt was incurred <u>4/25/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>MAILING SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,490.27</b>
3.149	Nonpriority creditor's name and mailing address <b>POPULAR AUTO, INC.</b> <b>PO BOX 15011</b> <b>San Juan, PR 00902-8511</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>VEHICLE LEASE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,901.20</b>
3.150	Nonpriority creditor's name and mailing address <b>PR OFFICE SOLUTIONS</b> <b>PMB 339 100 GRAND PASEO</b> <b>BLVD SUITE 112</b> <b>San Juan, PR 00926-5955</b> Date(s) debt was incurred <u>1/15/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>OFFICE SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,921.76</b>
3.151	Nonpriority creditor's name and mailing address <b>PRECISION EXTERMINATING SERV</b> <b>PMB 147</b> <b>352. AVE. SAN CLAUDIO</b> <b>San Juan, PR 00926</b> Date(s) debt was incurred <u>9/4/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PEST CONTROL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,486.00</b>
3.152	Nonpriority creditor's name and mailing address <b>PRLP PROPERTIES I LLC</b> <b>COLGATE PALMOLIVE BLDG STE 308</b> <b>STREET 1 METRO OFFICE PARK</b> <b>Guaynabo, PR 00968-1705</b> Date(s) debt was incurred <u>8/1/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$66,360.09</b>
3.153	Nonpriority creditor's name and mailing address <b>PROGRESSIVE SALES AND SERVICES</b> <b>PO BOX 10876</b> <b>San Juan, PR 00922-0876</b> Date(s) debt was incurred <u>4/11/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>KITCHEN EQUIPMENT AND SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$183.98</b>
3.154	Nonpriority creditor's name and mailing address <b>PUERTO RICO DUST CONTROL</b> <b>PO BOX 362048</b> <b>San Juan, PR 00936-2048</b> Date(s) debt was incurred <u>7/1/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>MAINTENANCE SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,882.14</b>

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

<b>3.155</b> Nonpriority creditor's name and mailing address <b>PUERTO RICO HOSPITAL SUPPLY INC</b> <b>CALL BOX 158</b> <b>Carolina, PR 00986-0158</b> Date(s) debt was incurred <u>1/20/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>MEDICAL SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,915.51</b>
<b>3.156</b> Nonpriority creditor's name and mailing address <b>QUALITY CLEANING PRODUCTS RC INC</b> <b>PMB 546</b> <b>PO BOX 607061</b> <b>Bayamon, PR 00960-7061</b> Date(s) debt was incurred <u>12/29/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CLEANING SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,609.84</b>
<b>3.157</b> Nonpriority creditor's name and mailing address <b>QUINONES MEDICAL TRAINING</b> <b>URB PASEOS DE CEIBA</b> <b>AVE CEIBA 33</b> <b>Ceiba, PR 00735</b> Date(s) debt was incurred <u>8/12/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONTINUED EDUCATION SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$910.00</b>
<b>3.158</b> Nonpriority creditor's name and mailing address <b>RAFAEL AGOSTO CARTAGENA</b> <b>ALTURAS DE RIO GRANDE</b> <b>CALLE 3 D 154</b> <b>Rio Grande, PR 00745</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
<b>3.159</b> Nonpriority creditor's name and mailing address <b>REFRIMECH PLUS CORP</b> <b>PO BOX 194408</b> <b>San Juan, PR 00919-2523</b> Date(s) debt was incurred <u>6/15/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>AIR CONDITIONING MAINTENANCE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,243.88</b>
<b>3.160</b> Nonpriority creditor's name and mailing address <b>RESTROOM SERVICES</b> <b>PO BOX 362048</b> <b>San Juan, PR 00936-2048</b> Date(s) debt was incurred <u>12/16/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CLEANING SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$248.32</b>
<b>3.181</b> Nonpriority creditor's name and mailing address <b>RICARDO GOMEZ DAVILA</b> <b>BO DUQUE</b> <b>BUZON 2180 A</b> <b>Naguabo, PR 00718</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>

Debtor **MBTI OF PUERTO RICO INC**

Case number (if known) \_\_\_\_\_

Name

3.162 Nonpriority creditor's name and mailing address

**RICOH**  
**PO BOX 71459**  
**San Juan, PR 00936-8559**

Date(s) debt was incurred 2/26/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PHOTOCOPIERS

Is the claim subject to offset? ☒ No ☐ Yes

**\$5,090.98**

3.163 Nonpriority creditor's name and mailing address

**ROBERTO SEDA COLONDRES**  
**PO BOX 180**  
**Maricao, PR 00606**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$35.00**

3.164 Nonpriority creditor's name and mailing address

**ROMMEL E ALFONSECA PEREZ**  
**LA ESPERANZA S-42**  
**CALLE 16**  
**Vega Alta, PR 00692**

Date(s) debt was incurred 7/1/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$60.00**

3.165 Nonpriority creditor's name and mailing address

**SIMON RIVERA**  
**URB BRISAS DE LOIZA**  
**NUM 234 CALLE LIBRA**  
**Canovanas, PR 00729**

Date(s) debt was incurred 2/8/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$700.00**

3.166 Nonpriority creditor's name and mailing address

**SPECIALTY OFFICE PRODUCTS**  
**PO BOX 1914**  
**Guaynabo, PR 00970-1014**

Date(s) debt was incurred 2/3/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: OFFICE SUPPLIES

Is the claim subject to offset? ☒ No ☐ Yes

**\$3,043.46**

3.167 Nonpriority creditor's name and mailing address

**STEVEN DIAZ**  
**BO OBRERO**  
**CALLE 7 NUM 623**  
**San Juan, PR 00915**

Date(s) debt was incurred 5/23/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: EMPLOYEE EXPENSES REIMBURSEMENT

Is the claim subject to offset? ☒ No ☐ Yes

**\$555.00**

3.168 Nonpriority creditor's name and mailing address

**SYSTRONICS**  
**PO BOX 194030**  
**San Juan, PR 00919-4030**

Date(s) debt was incurred 5/9/2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PHOTOCOPIER EQUIPMENT LEASING

Is the claim subject to offset? ☒ No ☐ Yes

**\$12,354.20**

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.169	Nonpriority creditor's name and mailing address <b>THE OFFICE SHOOP</b> <b>PO BOX 195497</b> <b>San Juan, PR 00919-5497</b> Date(s) debt was incurred <u>4/11/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>OFFICE SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,583.17</b>
3.170	Nonpriority creditor's name and mailing address <b>THE SHERWIN WILLIAMS</b> <b>AVE DE DIEGO NUM 570</b> <b>PUERTO NUEVO</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred <u>4/8/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PAINTING MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$905.67</b>
3.171	Nonpriority creditor's name and mailing address <b>TOMAS MORALES SANTANA</b> <b>URB QUINTAS DE DORADO</b> <b>CALLE CAOBA J 9</b> <b>Dorado, PR 00646</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17.50</b>
3.172	Nonpriority creditor's name and mailing address <b>TRAFON GROUP</b> <b>MERCADO CENTRAL CALLE C 1229</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred <u>5/20/2016</u> Last 4 digits of account number <u>2020</u>	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOOD SUPPLIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,556.78</b>
3.173	Nonpriority creditor's name and mailing address <b>TRANSPORTE DIAZ INC</b> <b>NUM 60 HACIENDA PRIMAVERA</b> <b>Cidra, PR 00739</b> Date(s) debt was incurred <u>8/31/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TRANSPORTATION SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$599,605.00</b>
3.174	Nonpriority creditor's name and mailing address <b>TRANSPORTE ESCOLAR GIL INC</b> <b>RR 11 BOX 5721</b> <b>BO NUEVO</b> <b>Bayamon, PR 00956</b> Date(s) debt was incurred <u>2/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TRANSPORTATION SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$114,900.00</b>
3.175	Nonpriority creditor's name and mailing address <b>TRIPLE-S SALUD</b> <b>PO BOX 71548</b> <b>San Juan, PR 00936-8648</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number <u>0037</u>	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HEALTH INSURANCE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$159,963.55</b>



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

3.176 Nonpriority creditor's name and mailing address  
**TRUE GUARD SECURITY INC**  
**161 AVE PONCE DE LEON**  
**OFICINA 304**  
**San Juan, PR 00917**  
Date(s) debt was incurred 3/15/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$107,902.96**

- ☒ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SECURITY SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.177 Nonpriority creditor's name and mailing address  
**UNITED ELECTRICAL SUPPLY INC**  
**URB REPARTO SEVILLA NUM 959**  
**CALLE PAGANINI**  
**San Juan, PR 00924**  
Date(s) debt was incurred 4/7/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$230.81**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: MAINTENANCE SERVICES

Is the claim subject to offset? ☒ No ☐ Yes

3.178 Nonpriority creditor's name and mailing address  
**UNITED ENTREPRENEURS LLC**  
**URB VILLA CAPARRA**  
**13 CALLE A**  
**Guaynabo, PR 00966**  
Date(s) debt was incurred 9/7/2012  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$1,140,712.93**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: (FORMERLY FA & SONS, S.E.)  
NOTES PAYABLE

Is the claim subject to offset? ☒ No ☐ Yes

3.179 Nonpriority creditor's name and mailing address  
**UNIVERSAL CARE CORPORATION**  
**PO BOX 1051**  
**Sabana Seca, PR 00952-1051**  
Date(s) debt was incurred 5/31/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$612.70**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: MEDICAL SUPPLIES AND EQUIPMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.180 Nonpriority creditor's name and mailing address  
**UNIVERSAL FIRE EQUIPMENT**  
**URB MONTE BELLO**  
**NUM 5015**  
**Hormigueros, PR 00660**  
Date(s) debt was incurred 5/27/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$579.80**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SAFETY EQUIPMENT

Is the claim subject to offset? ☒ No ☐ Yes

3.181 Nonpriority creditor's name and mailing address  
**UNIVERSAL INSURANCE COMPANY**  
**PO BOX 71338**  
**San Juan, PR 00936-8438**  
Date(s) debt was incurred 7/1/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**\$19,375.35**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: RENT

Is the claim subject to offset? ☒ No ☐ Yes

3.182 Nonpriority creditor's name and mailing address  
**US DEPARTMENT OF EDUCATION**  
**FINANCIAL SQUARE**  
**32 OLD SLIP 25TH FLOOR**  
**New York, NY 10005**  
Date(s) debt was incurred 8/15/2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

**Unknown**

- ☒ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PROCEEDING FROM REVIEW PROGRAM

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **MBTI OF PUERTO RICO INC**

Case number (if known)

3.183	Nonpriority creditor's name and mailing address <b>VIASINC</b> <b>1766 LACASSIE AVE</b> <b>SUITE 103</b> <b>Orinda, CA 94563</b> Date(s) debt was incurred <u>8/12/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>VOCATIONAL INSTRUCT. &amp; SOFTWARE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$950.00</b>
3.184	Nonpriority creditor's name and mailing address <b>VICENTE AND CUEBAS LAW OFFICE</b> <b>PO BOX 11609</b> <b>San Juan, PR 00910</b> Date(s) debt was incurred <u>8/19/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LEGAL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27,208.00</b>
3.185	Nonpriority creditor's name and mailing address <b>VIVIANA CINTRON DIAZ</b> <b>UNKNOWN</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$60.00</b>
3.186	Nonpriority creditor's name and mailing address <b>WALLYS ORTIZ ACOSTA</b> <b>NUM 16 CALLEJON FAS</b> <b>Cabo Rojo, PR 00623</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
3.187	Nonpriority creditor's name and mailing address <b>WESLEY PAGAN GUADALUPE</b> <b>BO SAINT JUST</b> <b>CALLE 2 148 A</b> <b>Trujillo Alto, PR 00976</b> Date(s) debt was incurred <u>7/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35.00</b>
3.188	Nonpriority creditor's name and mailing address <b>WORLDNET TELECOMMUNICATIONS INC</b> <b>PO BOX 70201</b> <b>San Juan, PR 00936-8201</b> Date(s) debt was incurred <u>6/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>DATA AND INTERNET SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,559.35</b>
3.189	Nonpriority creditor's name and mailing address <b>YARITZA CRUZ ALVARADO</b> <b>CONDOMINIO CAMINITO 27</b> <b>CARR189 APT0 2708</b> <b>San Juan, PR 00919</b> Date(s) debt was incurred <u>5/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMPLOYEE EXPENSES REIMBURSEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50.52</b>

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

**3.190** Nonpriority creditor's name and mailing address

**YESENIA COLON CRUZ  
PORTALES DE SAN JUAN  
APT J 175  
San Juan, PR 00924**

Date(s) debt was incurred **7/1/2016**

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply

**\$35.00**

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim: **EMPLOYEE EXPENSES REIMBURSEMENT**

Is the claim subject to offset? ☒ No ☐ Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 306,374.31
5b.	+ \$ 5,141,609.65
5c.	\$ 5,447,983.96

Fill in this information to identify the case:

Debtor name **MBTI OF PUERTO RICO INC**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **2012 VOLKSWAGEN BETTLE SERIAL NUM. 3VNVA7ATXCM638677**  
State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**AUTOMOTIVE RENTAL INC  
PO BOX 8500-4375  
Philadelphia, PA 19178-4375**

2.2. State what the contract or lease is for and the nature of the debtor's interest **2013 MAZDA CX5 SERIAL NUM. JM3KEZ8E5D0114233**

State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054**

2.3. State what the contract or lease is for and the nature of the debtor's interest **2012 FORD TRANSIT SERIAL NUM. NMOKS9BN6CT123480**

State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054**

2.4. State what the contract or lease is for and the nature of the debtor's interest **2012 FORD TRANSIT SERIAL NUM. NMOLS7AN4CT123469**

State the term remaining **MONTH TO MONTH**

List the contract number of any government contract \_\_\_\_\_

**AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054**

Debtor 1 **MBTI OF PUERTO RICO INC**

Case number (if known)

First Name

Middle Name

Last Name

**Additional Page if You Have More Contracts or Leases**

**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest      **2014 LEXUS RX350  
SERIAL NUM.  
JTJBK1BA6E2036041**

State the term remaining      **MONTH TO MONTH**

List the contract number of any government contract

**AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054**

2.6. State what the contract or lease is for and the nature of the debtor's interest      **2014 HONDA ACCORD  
EX-L  
SERIAL NUM.  
2HGCR3F86EA008429**

State the term remaining      **MONTH TO MONTH**

List the contract number of any government contract

**AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054**

2.7. State what the contract or lease is for and the nature of the debtor's interest      **2015 ACURA MDX  
SERIAL NUM.  
5FRYD3H46FB002974**

State the term remaining      **MONTH TO MONTH**

List the contract number of any government contract

**AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054**

2.8. State what the contract or lease is for and the nature of the debtor's interest      **FINANCING SERVICES  
FOR STUDENTS**

State the term remaining      **EIGHTEEN (18)  
MONTHS,  
COMMENCING ON  
JULY 31, 2014**

List the contract number of any government contract

**COOP DE AHORRO Y CREDITO DE BARRANQUITAS  
PO BOX 686  
Barranquitas, PR 00794**

2.9. State what the contract or lease is for and the nature of the debtor's interest      **ELEVATOR  
MAINTENANCE  
CONTRACT FOR  
FACILITIES  
AT 1256 PONCE DE  
LEON AVENUE,  
SANTURCE, PUERTO  
RICO**

State the term remaining      **ONE (1) YEAR,  
COMMENCING ON  
OCTOBER 18, 2011**

List the contract number of any government contract

**DEYA ELEVATOR SERVICES INC  
PO BOX 362411  
San Juan, PR 00936-2411**



Debtor 1 **MBTI OF PUERTO RICO INC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases**

**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.10. State what the contract or lease is for and the nature of the debtor's interest

**ELEVATOR  
MAINTENANCE  
CONTRACT FOR  
FACILITIES  
AT 205 MUÑOZ RIVERA  
STREET, FAJARDO,  
PUERTO RICO  
ONE (1) YEAR,  
COMMENCING ON  
OCTOBER 18, 2011**

State the term remaining

List the contract number of any government contract

**DEYA ELEVATOR SERVICES INC  
PO BOX 362411  
San Juan, PR 00936-2411**

2.11. State what the contract or lease is for and the nature of the debtor's interest

**COMMERCIAL LEASE  
(A) BUILDING AT 203  
MUÑOZ RIVERA,  
FAJARDO, PR**

State the term remaining

List the contract number of any government contract

**(B) PARCEL OF LAND  
AT ISABEL ABREU  
AGUILAR STREET,  
FAJARDO, PR  
THREE (3) YEARS,  
COMMENCING ON  
JANUARY 1, 2010**

**JESUS BIRD SERRANO  
PO BOX 946  
Fajardo, PR 00738**

2.12. State what the contract or lease is for and the nature of the debtor's interest

**FOUR (4)  
COMMERCIAL  
BUILDINGS AND  
ONE (1) PARCEL OF  
LAND USED FOR  
PARKING SPACES AT  
MUÑOZ RIVERA  
STREET, FAJARDO, PR  
TWO (2) YEARS AND  
TEN (10) MONTHS**

State the term remaining

List the contract number of any government contract

**MAFIBO REALTY INC  
PO BOX 1169  
Fajardo, PR 00738**

2.13. State what the contract or lease is for and the nature of the debtor's interest

**COMMERCIAL  
BUILDING  
AT 10 SANTIAGO  
RIERA PALMER  
STREET,  
MAYAGUEZ, PUERTO  
RICO  
FOUR (4) YEARS AND  
THREE (3) MONTHS**

State the term remaining

List the contract number of any government contract

**MARLENE ROCHAR IZQUIERDO**

Debtor 1 **MBTI OF PUERTO RICO INC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases**

**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.14. State what the contract or lease is for and the nature of the debtor's interest

SEVENTY FOUR (74)  
SPACES FOR  
PARKINGS  
AT LUIS MUÑOZ  
RIVERA PARKING LOT  
AUTOMATIC RENEWAL

State the term remaining

List the contract number of any government contract

MARVIC PARKING SERVICES INC  
27 NORTH PERAL STREET  
Mayaguez, PR 00680

2.15. State what the contract or lease is for and the nature of the debtor's interest

COMMERCIAL  
BUILDING  
AT 1304 PONCE DE  
LEON AVENUE,  
SANTURCE, PUERTO  
RICO  
FIVE (5) YEARS,  
COMMENCING ON MAY  
1, 2015

State the term remaining

List the contract number of any government contract

MIC CORPORATION  
PO BOX 19600  
FERNANDO JUNCOS STA  
San Juan, PR 00910-1600

2.16. State what the contract or lease is for and the nature of the debtor's interest

COPIERS LEASE  
AGREEMENT

State the term remaining

List the contract number of any government contract

FIVE (5) YEARS,  
COMMENCING ON  
JANUARY 1, 2014

SYSTRONICS  
PO BOX 194030  
San Juan, PR 00919-4030

2.17. State what the contract or lease is for and the nature of the debtor's interest

TRANSPORTATION  
SERVICES

State the term remaining

List the contract number of any government contract

ONE (1) YEAR AND  
THREE (3) MONTHS

TRANSPORTE ESCOLAR GIL INC  
RR 11 BOX 5721  
BO NUEVO  
Bayamon, PR 00956

Fill in this information to identify the case:

Debtor name **MBTI OF PUERTO RICO INC**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206H

**Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 BARBARA ALONSO VILA	PMB 216 AVE ESMERALDA 405 Guaynabo, PR 00969	ORIENTAL BANK	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 BARBARA ALONSO VILA	PMB 216 AVE ESMERALDA 405 Guaynabo, PR 00969	ORIENTAL BANK	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3 ENRIQUE VILLAVICENCIO	PMB 216 AVE ESMERALDA 405 Guaynabo, PR 00969	ORIENTAL BANK	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4 ENRIQUE VILLAVICENCIO	PMB 216 AVE ESMERALDA 405 Guaynabo, PR 00969	ORIENTAL BANK	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____



Debtor **MBTI OF PUERTO RICO INC**

Case number (if known)

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
Column 1: Codebtor Column 2: Creditor

2.5	<b>FIDEL ALONSO VILA</b>	<b>G9 Ave San Patricio Cond Casamagna Apt 211 Guaynabo, PR 00968</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.6	<b>FIDEL ALONSO VILA</b>	<b>G9 AVE SAN PATRICIO COND CASAMAGNA APT 211 Guaynabo, PR 00968</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	<b>KONRAD WITTENBERG STECHER</b>	<b>Urb. Villa Mercedes 2900 carr. 834 box 4002 Guaynabo, PR 00971</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	<b>KONRAD WITTENBERG STECHER</b>	<b>URB VILLA MERCEDES 2900 CARR 834 BOX 4002 Guaynabo, PR 00971</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
-----	--	---	----------------------	--

2.9	<b>NICOLE CARVAJAL DIAZ</b>	<b>G9 Ave San Patricio Cond Casamagna Apt 211 Guaynabo, PR 00968</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
-----	---------------------------------	--	----------------------	--

2.10	<b>NICOLE CARVAJAL DIAZ</b>	<b>G9 AVE SAN PATRICIO COND CASAMAGNA APT 211 Guaynabo, PR 00968</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
------	---------------------------------	--	----------------------	--

2.11	<b>PAULETT ALONSO VILA</b>	<b>La Villa Garden Apts. #26 Carr. 833 Apt.103-A Guaynabo, PR 00971</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Debtor **MBTI OF PUERTO RICO INC**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
Column 1: Codebtor Column 2: Creditor

2.12	<b>PAULETTE ALONSO VILA</b>	<b>LA VILLA GARDEN APTS #26 CARR. 833 APT. 103-A Guaynabo, PR 00971</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
------	---------------------------------	---	----------------------	--

2.13	<b>SHARLENE ALONSO FERNANDEZ</b>	<b>URB VILLA MERCEDES 2900 CARR. 834 BOX 4002 Guaynabo, PR 00971</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
------	--	--	----------------------	--

2.14	<b>SHARLINE ALONSO FERNANDEZ</b>	<b>Urb. Villa Mercedes 2900 carr. 834 box 4002 Guaynabo, PR 00971</b>	<b>ORIENTAL BANK</b>	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
------	--	---	----------------------	--

Fill in this information to identify the case:

Debtor name MBTI OF PUERTO RICO INC

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 7, 2016

X

Barbara Alonso Vila

Signature of individual signing on behalf of debtor

BARBARA ALONSO VILA

Printed name

PRESIDENT

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **MBTI OF PUERTO RICO INC**  
 United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**  
 Case number (if known):

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
ADRENALINE ADVERTISING CORP PO BOX 16262 San Juan, PR 00908-6262	787-908-1000	ADVERTISING SERVICES	Contingent Unliquidated Disputed			\$983,479.66
AUTORIDAD DE ENERGIA ELECTRICA PO BOX 363508 San Juan, PR 00936-3508	787-521-3434	ELECTRIC POWER SERVICE				\$134,142.73
CONCORDE METRO SEGUROS LLC PO BOX 362708 San Juan, PR 00936-2708	787-756-3939	RENT	Contingent Unliquidated Disputed			\$112,978.37
COOP DE AHORRO Y CREDITO DE BARRANQUITAS PO BOX 686 Barranquitas, PR 00794	787-857-3500	STUDENTS LOANS WITH RECOURSE		\$1,785,074.00	\$726,205.25	\$1,058,868.75
DATA ACCESS 316 AVE CONSTITUCION SUITE 100 San Juan, PR 00901	787-977-8025	NETWORK MAINTENANCE SERVICES				\$59,682.40
DEL RIO TRADING AND BEAUTY SUPPLY PO BOX 779 Camuy, PR 00627	787-898-5093	BEAUTY PRODUCTS				\$108,732.55
DEL VALLE AND ASOC CORP HC 10 BOX 49401 Caguas, PR 00725	787-486-5931	ACCOUNTING AND AUDITING SERVICES				\$48,186.64

Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
DEPARTMENT OF TREASURY OF PUERTO RICO PO BOX 9024140 OFFICE 424 B OFFICE 424 B San Juan, PR 00902-4140		PAYROLL TAXES, CODE (300) VARIOUS PERIODS (ESTIMATED)				\$260,000.00
FIRST SECURITY MILLENNIUM CORP PO BOX 1977 Bayamon, PR 00960-1977	787-296-4812	SECURITY SERVICES				\$67,934.95
HLB PARISSI PO BOX 195607 San Juan, PR 00918-4149	787-641-9801	ACCOUNTING SERVICES				\$45,636.55
INTERNAL REVENUE SERVICE PO BOX 7346 Philadelphia, PA 19101-7346		CORPORATE INCOME TAX (10/31/2012 TAX RETURN)				\$264,481.00
JUAN CARLOS INC PO BOX 439 Loiza, PR 00772	787-876-3628	TRANSPORTATION SERVICES				\$202,513.20
MERCEDES BENZ FINANCIAL SERV PO BOX 5209 Carol Stream, IL 60197-5209	1-800-654-6222	VEHICLE LOAN		\$83,799.37	\$46,000.00	\$37,799.37
NALDITOS BUS LINE INC PO BOX 2 Sabana Grande, PR 00637	787-376-4644	TRANSPORTATION SERVICES				\$175,480.00
ORIENTAL BANK PO BOX 195115 San Juan, PR 00919-5115	1-877-541-5739	LINE OF CREDIT		\$2,845,000.00	\$869,820.07	\$1,975,179.93
PRLP PROPERTIES I LLC COLGATE PALMOLIVE BLDG STE 308 STREET 1 METRO OFFICE PARK Guaynabo, PR 00968-1705	787-783-2277	RENT				\$66,360.09
TRANSPORTE DIAZ INC NUM 60 HACIENDA PRIMAVERA Cidra, PR 00739	787-509-7100	TRANSPORTATION SERVICES				\$599,605.00



Debtor **MBTI OF PUERTO RICO INC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
TRANSPORTE ESCOLAR GIL INC RR 11 BOX 5721 BO NUEVO Bayamon, PR 00956	787-226-5616	TRANSPORTATION SERVICES				\$114,900.00
TRIPLE-S SALUD PO BOX 71548 San Juan, PR 00936-8648	787-774-6060	HEALTH INSURANCE				\$159,963.55
TRUE GUARD SECURITY INC 161 AVE PONCE DE LEON OFICINA 304 San Juan, PR 00917	787-367-0981	SECURITY SERVICES	Contingent Unliquidated Disputed			\$107,902.96



**United States Bankruptcy Court  
District of Puerto Rico**

In re MBTI OF PUERTO RICO INC

Debtor(s)

Case No.  
Chapter

11

**VERIFICATION OF CREDITOR MATRIX**

I, the PRESIDENT of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: October 7, 2016



BARBARA ALONSO VILA/PRESIDENT  
Signer/Title

A AND A EMPLOYEE BENEFIT CONSULTING CORP  
PO BOX 13928  
San Juan, PR 00908-3928

AA ENVIROMENTAL SERVICES  
PMB 548  
CALL BOX 20000  
Canovanas, PR 00729

ACADEMIC EMBLEMS SPECIALTIES  
PO BOX 3650  
AVE UNIVERSIDAD ESQ ESTEBAN GONZALEZ  
Guaynabo, PR 00970-3650

ADOLFO CORREA ACOSTA  
ESTANCIAS LA FUENTE  
CALLE LIRIO 38  
Toa Alta, PR 00953

ADRENALINE ADVERTISING CORP  
PO BOX 16262  
San Juan, PR 00908-6262

AFLAC  
WORLDWIDE HEADQUARTERS  
Columbus, GA 31999

AGRO PRODUCE PUERTO RICO INC  
PO BOX 11908  
San Juan, PR 00922-1908

ALEX EVENTS CORP  
HC 15 BOX 16020  
Humacao, PR 00791

ALFONSO PIZARRO RAMIREZ  
URB LA RAMBLA  
1275 CALLE CLARISA  
Ponce, PR 00730

ALLIED WASTE SERVICES  
PO BOX 51986  
Toa Baja, PR 00950-1986

AMERICAN PAPER  
AMELIA INDUSTRIAL PARK  
26 CALLE EMMA  
Guaynabo, PR 00968-8007

ANGEL NEGRON CANDELARIA  
UNKNOW

AOR BUILDING SUPPLIES  
PO BOX 13606  
San Juan, PR 00908-3606

AQUAPURE  
URB VILLAS DE PARANA S 1 2  
CALLE 11  
San Juan, PR 00926-6045

ARMANDO RODRIGUEZ RANGEL  
H-60 CALLE DOMINICO  
ALTOS DE TORRIMAR  
Bayamon, PR 00959

ASUME  
PO BOX 70376  
San Juan, PR 00936-8376

ATLANTIC MASTER PARKING SERV INC  
PMB SUITE 442  
AVE RIO HONDO  
Bayamon, PR 00961-3105

AUTOMOTIVE RENTAL INC  
PO BOX 5039  
Mount Laurel, NJ 08054

AUTOMOTIVE RENTAL INC  
PO BOX 8500-4375  
Philadelphia, PA 19178-4375

AUTORIDAD DE ACUEDUCTOS Y ALCANTARILLADO  
PO BOX 70101  
San Juan, PR 00936-8101

AUTORIDAD DE ENERGIA ELECTRICA  
PO BOX 363508  
San Juan, PR 00936-3508

BALLESTER HERMANOS INC  
PO BOX 364548  
San Juan, PR 00936-4548

BANCO POPULAR DE PR  
PO BOX 70100  
San Juan, PR 00936-8100

BARBARA ALONSO VILA  
PMB 216  
AVE ESMERALDA 405  
Guaynabo, PR 00969

BETANCES PROFESSIONAL SERVICES AND EQUIP  
URB SAN FERNANDO F 11  
AVE BETANCES  
Bayamon, PR 00957

BOQUERON BEACH HOTEL  
PO BOX 498  
Boqueron, PR 00622

BORBON FOODS LLC  
200 RAFAEL CORDERO  
AVE STE 140 PMB 320  
Caguas, PR 00725

BRENDA I RODRIGUEZ NEGRON  
HC 01 BOX 3904  
Hormigueros, PR 00660

CABO ROJO GAS INC  
PO BOX 883  
CALLE MUNOZ RIVERA 29  
Cabo Rojo, PR 00623

CADILLAC UNIFORMS AND LINEN SUPPLY  
IND MINILLAS 221  
AVE LAUREL  
Bayamon, PR 00959-1908

CAMERA MUNDI INC  
PO BOX 6860  
Caguas, PR 00726

CARIBBEAN FOOD PRODUCTS CORP  
PO BOX 244  
Puerto Real, PR 00740-0244

CARIBBEAN STONE PRODUCTS  
PO BOX 86  
Vega Baja, PR 00694

CARIBBEAN WATER COOLER  
PO BOX 9505  
San Juan, PR 00908-0505

CARIBE FINE FOODS  
PO BOX 10585  
San Juan, PR 00922

CARIMAR NIEVES  
URB REXVILLE  
CALLE 23 A CF 25  
Bayamon, PR 00957

CARLOS FORTIER MELENDEZ  
VILLA CAROLINA  
CALLE 435 BLQ 192 NUM 22  
Carolina, PR 00985

CENGAGE LEARNING  
PO BOX 95999  
Chicago, IL 60694-5999

CENTRO DE SERVICIOS DE SALUD DE BAYAMON  
AVE LOMAS VERDES IF 48  
Bayamon, PR 00956

CENTRO EDUCACION SECUNDARIA ACELERADA  
PO BOX 2836  
Rio Grande, PR 00745

CH SOUND  
CALLE EL TREN 142  
LA PUNTILLA  
Catano, PR 00962

COCA COLA PUERTO RICO BOTTLERS  
PO BOX 51985  
Toa Baja, PR 00950-1985

COLEGIO ACELERADO EDUCACION SECUNDARIA  
URB.COUNTRY CLUB  
AVE CAMPO RICO GL 25  
Carolina, PR 00985

COMFORT AIR ZONE  
PO BOX 10  
Dorado, PR 00646

COMNET TECHNOLOGY GROUP  
C 535 VIZCAYA 3 10  
Carolina, PR 00985-2301

COMPUTER LINK  
PO BOX 193724  
San Juan, PR 00919

CONCORDE METRO SEGUROS LLC  
PO BOX 362708  
San Juan, PR 00936-2708

CONSOLIDATED WASTE SERV CORP  
PO BOX 1322  
Gurabo, PR 00778-1319

CONSTRUCTION & COMMUNICATIONS CONTRACTORS  
RR-10 BOX 10225 B  
San Juan, PR 00926-9513

COOP DE AHORRO Y CREDITO DE BARRANQUITAS  
PO BOX 686  
Barranquitas, PR 00794

CRIM  
PO BOX 195387  
San Juan, PR 00919-5387

CRISTIAN MARRERO  
URB PONCE DE LEON  
CALLE 23 NUM 246  
Guaynabo, PR 00969

CRISTINA ROSADO SILVA  
PO BOX 985  
Rincon, PR 00677

CSI LEASING PUERTO RICO INC  
METRO OFFICE PARK 7  
SUITE 204 OFICINA 205  
Guaynabo, PR 00968

CT CORPORATION  
PO BOX 4349  
Carol Stream, IL 60197-4349

DADE PAPER  
PO BOX 51535  
Toa Baja, PR 00950-1535

DATA ACCESS  
316 AVE CONSTITUCION  
SUITE 100  
San Juan, PR 00901

DATA TEK  
AVENIDA CONSTITUCION NUM 316  
San Juan, PR 00901

DEL RIO TRADING AND BEAUTY SUPPLY  
PO BOX 779  
Camuy, PR 00627

DEL VALLE AND ASOC CORP  
HC 10 BOX 49401  
Caguas, PR 00725

DEPARTMENT OF TREASURY OF PUERTO RICO  
PO BOX 9024140  
OFFICE 424 B  
San Juan, PR 00902-4140



DEPORTES SALVADOR COLOM  
PO BOX 9235  
San Juan, PR 00908-0235

DEPTO DEL TRABAJO Y RECURSOS HUMANOS  
PO BOX 195540  
San Juan, PR 00919-5540

DEYA ELEVATOR SERVICES INC  
PO BOX 362411  
San Juan, PR 00936-2411

DIEGO MONTANEZ SANCHEZ  
PO BOX 340  
Puerto Real, PR 00740

DRA LOURDES MERCADO TORRES  
PO BOX 117  
Isabela, PR 00662

DUNAMIS CONTROL SERVICE INC  
HC 02 BOX 6328  
Lares, PR 00669

ECOLAB MANUFACTURING INC  
PO BOX 607086  
Bayamon, PR 00960

EDDIES REFRIGERATION SERV  
CALLE GUAYAMA NUM 62  
San Juan, PR 00917

EMPRESAS DE GAS CO., INC.  
PO BOX 1025  
Sabana Seca, PR 00952-1230

ENRIQUE VILLAVICENCIO  
PMB 216  
AVE ESMERALDA 405  
Guaynabo, PR 00969

ERIC SANTIAGO  
BARRIO MAMEY CARR 933 KM 1 4  
Juncos, PR 00777

ESCUELA VIRTUAL DE PUERTO RICO  
COND COBIANS PLAZA  
1607 AVE PONCE DE LEON APT PH7  
San Juan, PR 00909

EUROAMERICANA DE EDICIONES CORP  
PO BOX 195697  
San Juan, PR 00919-5697

FERNANDO GARCIA SANTOS  
URB LEVITOWN  
DB 15 CALLE LAGO PATILLAS  
Toa Baja, PR 00949

FIDEL ALONSO VILA  
G9 Ave San Patricio  
Cond Casamagna Apt 211  
Guaynabo, PR 00968

FIRE FOE INC  
PO BOX 4656  
Carolina, PR 00984

FIRST SECURITY MILLENIUM CORP  
PO BOX 1977  
Bayamon, PR 00960-1977

FRANKIE RODRIGUEZ  
RR 7 BOX 7535  
San Juan, PR 00926

FREDDY LOZADA NEGRON  
URB INMACULADA  
CALLE PADRE APONTE NUM 117  
Vega Alta, PR 00692

GABRIEL RODRIGUEZ SANTIAGO  
REPARTO FLAMBOYAN  
C 7 CALLE CIPRES  
Mayaguez, PR 00680

GARRIGA PAPER  
PO BOX 364862  
San Juan, PR 00936-4862

GASPARDS DE PUERTO RICO  
PO BOX 838 CALLE JOSE D DIEGO  
251 BARRIO TOITA  
Cayey, PR 00737

GRAPHIC PRINTING  
PMB 325  
35 CALLE JUAN C BORBON SUITE 67  
Guaynabo, PR 00969-5375

GUARDIAN ELECTRONIC SECURITY SERV  
PO BOX 13966  
San Juan, PR 00908-3966

GUILLERMO RODRIGUEZ FIGUEROA  
URB VILLA UNIVERSITARIA  
CALLE 4 A 21  
Humacao, PR 00791

HASLER INC  
PO BOX 30193  
Tampa, FL 33630-3193

HERA PRINTING CORP  
PO BOX 362370  
San Juan, PR 00936-2370

HLB PARISSI  
PO BOX 195607  
San Juan, PR 00918-4149

HOSTOS MEDICAL SERV  
PO BOX 1586  
Mayaguez, PR 00681

HUMBERTO VIDAL INC  
DIVISION LEGAL  
PO BOX 21480  
San Juan, PR 00928-1480

IDALI ARROYO RUIZ  
RR 02 BUZON 3789  
Anasco, PR 00610

INTERACTIVE TECHNOLOGY  
470 AVE PONCE DE LEON  
San Juan, PR 00920

INTERIORES DEL OESTE INC  
PO BOX 3150  
Mayaguez, PR 00681-3150

INTERNAL REVENUE SERVICE  
PO BOX 7346  
Philadelphia, PA 19101-7346

IRCON PR  
PO BOX 19600  
FERNANDEZ JUNCOS STATION  
San Juan, PR 00910-1600

ISRAEL LEBRON  
PUESTO V 22 23  
PLAZA DEL MERCADO  
Mayaguez, PR 00680

JACKELINE LINARES  
PO BOX 70171  
PMB 138  
San Juan, PR 00936

JAYMAR NEGRON VALENTIN  
HC 01 BOX 4998  
Naguabo, PR 00718

JB PLUMBING  
HC 1 BOX 5161  
Barranquitas, PR 00794

JEAN MARIE BATISTA GUZMAN  
COND GALLERY PLAZA  
103 AVE DE DIEGO APT 1007  
San Juan, PR 00911

JESUS BIRD SERRANO  
PO BOX 946  
Fajardo, PR 00738

JOE AND VIC  
PO BOX 13502  
San Juan, PR 00908

JORGE CASTILLO NEGRON  
110 MARGINAL  
APARTADO 15 A  
Bayamon, PR 00959

JORGE OTERO  
PLAZA MERCADO  
CALLE ROBERT LOCAL NUM 5  
San Juan, PR 00907

JOSE GONZALEZ  
CALLE LAGUNA 171 A  
BARRIO ISRAEL  
San Juan, PR 00917

JOSE GUZMAN GS EXHIBIT  
URB VILLAS DE SAN AGUSTIN  
CALLE 4 B-1  
Bayamon, PR 00959-2036

JOSE MANUEL ESTRADA PAGANI  
VITALCOLON NUM 11  
San Sebastian, PR 00685

JOSE SANTIAGO INC  
PO BOX 191795  
San Juan, PR 00919-1795

JOSE W SUAREZ  
PO BOX 329  
Cabo Rojo, PR 00623

JUAN BENIQUEZ  
CALLE RASPINELL #909  
COUNTRY CLUB  
San Juan, PR 00924

JUAN CARLOS INC  
PO BOX 439  
Loiza, PR 00772

K R IMPORTS INC  
3105 TERRALINDA COURT  
Trujillo Alto, PR 00976

KERAMER CORP  
CALLE SAN MARTIN NUM 70  
Guaynabo, PR 00968

KIDANY MUNET VELEZ  
AVE LOS FILTROS NUM 300  
BOULEVAR DEL RIO 1 APT H227  
Guaynabo, PR 00971

KIRSTY C MENDEZ RODRIGUEZ  
COND BELLEVIEW  
148 A CALLE 2  
Trujillo Alto, PR 00976

KODE TECHNOLOGIES PUERTO RICO INC  
MARIO JULIA IND PARK  
698 CALLE B STE 1  
San Juan, PR 00920

KONRAD WITTENBERG STECHER  
Urb. Villa Mercedes  
2900 carr. 834 box 4002  
Guaynabo, PR 00971

KONRAD WITTENBERG STECHER  
URB VILLA MERCEDES  
2900 CARR 834 BOX 4002  
Guaynabo, PR 00971

KRISIA ABREU VELEZ  
HC 03 BOX 6272  
Humacao, PR 00791

KRISTOR ENTERPRISES INC  
3105 TERRALINDA COURT  
Trujillo Alto, PR 00976-3917

LCDO JESUS BIRD SERRANO  
PO BOX 946  
CALLE GARRIDO MORALES 15  
Canovanas, PR 00729

LCDO LUIS A LOPEZ LOPEZ  
EDIF PARADICE CERAMICS  
932 AVE HOSTOS OFICINA A 1  
Mayaguez, PR 00680

LEMRS CORP  
PMB 504 PO BOX 819  
Lares, PR 00669

LIBRERIA LUNA  
URB OASIS GARDENS  
CALLE ARGENTINA A 18  
Guaynabo, PR 00969

LINDA M FIGUEROA  
COND TORRES DEL PARQUE SUR  
1700 AVE F MONTILLA APT1603  
Bayamon, PR 00956-3071

LOURDES ACEVEDO  
HC 03 BOX 34555  
Aguadilla, PR 00603

MAFIBO REALTY INC  
PO BOX 1169  
Fajardo, PR 00738

MANUEL FREIJE ARCE INC  
CALL BOX 1904  
Toa Baja, PR 00950-1904

MANUEL MUNIZ ORTIZ  
PO BOX 9033  
San Juan, PR 00908

MARANYELIZ FUENTES MEDINA  
PO BOX 289  
Palmer, PR 00721

MARIA BRITO LABOY  
5 EXT VILLA NAVARRO  
Maunabo, PR 00707

MARIA ESTRADA COLON  
HC 05 BOX 56945  
Mayaguez, PR 00680

MARILYN LEON  
CALLE FLOR DE PRIMAVERA  
407 RIVER GARDENS  
Canovanas, PR 00729



MARLENE ROCHA IZQUIERDO  
UNKNOW

MARTA MONTANEZ ORTIZ  
URB RAMIREZ DE ARELLANO  
CALLE CAMPECHE 34  
Mayaguez, PR 00682

MARVIC PARKING SERVICES  
CALLE PERAL NUM 27  
Mayaguez, PR 00680

MARVIC PARKING SERVICES INC  
27 NORTH PERAL STREET  
Mayaguez, PR 00680

MAYAGUEZ PARKING CENTRO  
ENSANCHE RAMIREZ NUM 262  
CALLE MIRAMAR  
Mayaguez, PR 00682-6208

MENACO CORPORATION  
PO BOX 70183  
San Juan, PR 00936-8183

MERCEDES BENZ FINANCIAL SERV  
PO BOX 5209  
Carol Stream, IL 60197-5209

MIC CORPORATION  
PO BOX 19600  
FERNANDO JUNCOS STA  
San Juan, PR 00910-1600

MIGDALIA ILLAS  
URB VILLAS DE LOIZA  
CALLE 12 P 38  
Canovanas, PR 00729

MILLIE C ROSA PADUA  
URB RIVER VALLEY 5323  
CALLE CANOVANAS  
Canovanas, PR 00729

MQ SOUND  
REPARTO LAS DELICIAS NUM 7  
CARR NUM 102 KM 38 2  
San German, PR 00683

MR TODD LLC  
MIRAMAR PLAZA CENTER  
954 AVE PONCE DE LEON SUITE 204  
San Juan, PR 00908

MULTISYSTEMS  
PO BOX 191938  
San Juan, PR 00919-1938

MUNICIPIO DE BAYAMON  
PO BOX 1588  
Bayamon, PR 00960

MUNICIPIO DE FAJARDO  
PO BOX 865  
Fajardo, PR 00738-0865

MUNICIPIO DE MAYAGUEZ  
PO BOX 447  
Mayaguez, PR 00681-0447

MUNICIPIO DE SAN JUAN  
PO BOX 70179  
San Juan, PR 00917

NALDITOS BUS LINE INC  
PO BOX 2  
Sabana Grande, PR 00637

NATIONAL LIFE INSURANCE COMPANY  
PO BOX 366107  
San Juan, PR 00936-6107

NEOPOST USA INC  
25880 NETWORK PLACE  
Chicago, IL 60673-1258

NICOLE CARVAJAL DIAZ  
G9 Ave San Patricio  
Cond Casamagna Apt 211  
Guaynabo, PR 00968

NOEL PAMIAS  
PO BOX 772  
Carolina, PR 00986-0772

NOELVIS SAEZ CASTANEDA  
ATLANTIC VIEW  
161 VENUS  
Carolina, PR 00979

OFFICE BUDDIES  
PO BOX 589  
Guaynabo, PR 00970

OLGA LEON COLON  
ESTABCIAS SAN PEDRO  
I 52 SAN LUCAS  
Fajardo, PR 00738

ORIENTAL BANK  
PO BOX 195115  
San Juan, PR 00919-5115

ORLANDO CLARK COLON  
URB ALTURAS DE SAN PEDRO  
CALLE SAN CRISTOBAL R 34  
Fajardo, PR 00738

ORLANDO NATERA PENA  
CALLE LOIZA 11903  
San Juan, PR 00911

PABLO GUADALUPE MENDOZA  
VISTAS DE LUQUILLO II  
305 CALLE DIAMANTE H 2  
Luquillo, PR 00773

PAULETT ALONSO VILA  
La Villa Garden Apts.  
#26 Carr. 833 Apt.103-A  
Guaynabo, PR 00971

PAULETTE ALONSO VILA  
LA VILLA GARDEN APTS  
#26 CARR. 833 APT. 103-A  
Guaynabo, PR 00971

PEARSON EDUCATION  
PO BOX 366408  
San Juan, PR 00936-6408

PITNEY BOWES PUERTO RICO INC  
PO BOX 11662  
San Juan, PR 00922-1662

POPULAR AUTO, INC.  
PO BOX 15011  
San Juan, PR 00902-8511

PR OFFICE SOLUTIONS  
PMB 339 100 GRAND PASEO  
BLVD SUITE 112  
San Juan, PR 00926-5955

PRECISION EXTERMINATING SERV  
PMB 147  
352. AVE. SAN CLAUDIO  
San Juan, PR 00926

PRLP PROPERTIES I LLC  
COLGATE PALMOLIVE BLDG STE 308  
STREET 1 METRO OFFICE PARK  
Guaynabo, PR 00968-1705

PROGRESSIVE SALES AND SERVICES  
PO BOX 10876  
San Juan, PR 00922-0876

PUERTO RICO DUST CONTROL  
PO BOX 362048  
San Juan, PR 00936-2048

PUERTO RICO HOSPITAL SUPPLY INC  
CALL BOX 158  
Carolina, PR 00986-0158

QUALITY CLEANING PRODUCTS RC INC  
PMB 546  
PO BOX 607061  
Bayamon, PR 00960-7061

QUINONES MEDICAL TRAINING  
URB PASEOS DE CEIBA  
AVE CEIBA 33  
Ceiba, PR 00735

RAFAEL AGOSTO CARTAGENA  
ALTURAS DE RIO GRANDE  
CALLE 3 D 154  
Rio Grande, PR 00745

REFRIMECH PLUS CORP  
PO BOX 194408  
San Juan, PR 00919-2523

RESTROOM SERVICES  
PO BOX 362048  
San Juan, PR 00936-2048

RICARDO GOMEZ DAVILA  
BO DUQUE  
BUZON 2180 A  
Naguabo, PR 00718

RICOH  
PO BOX 71459  
San Juan, PR 00936-8559

ROBERTO SEDA COLONDRES  
PO BOX 180  
Maricao, PR 00606

ROMMEL E ALFONSECA PEREZ  
LA ESPERANZA S-42  
CALLE 16  
Vega Alta, PR 00692

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URB VILLA MERCEDES  
2900 CARR. 834 BOX 4002  
Guaynabo, PR 00971

SHARLINE ALONSO FERNANDEZ  
Urb. Villa Mercedes  
2900 Carr 834 box 4002  
Guaynabo, PR 00971

SIMON RIVERA  
URB BRISAS DE LOIZA  
NUM 234 CALLE LIBRA  
Canovanas, PR 00729

SPECIALTY OFFICE PRODUCTS  
PO BOX 1914  
Guaynabo, PR 00970-1014

STATE INSURANCE FUND CORPORATION  
PO BOX 365028  
San Juan, PR 00936-5028

STEVEN DIAZ  
BO OBRERO  
CALLE 7 NUM 623  
San Juan, PR 00915

SYSTRONICS  
PO BOX 194030  
San Juan, PR 00919-4030

THE OFFICE SHOOP  
PO BOX 195497  
San Juan, PR 00919-5497

THE SHERWIN WILLIAMS  
AVE DE DIEGO NUM 570  
PUERTO NUEVO  
San Juan, PR 00920

TOMAS MORALES SANTANA  
URB QUINTAS DE DORADO  
CALLE CAOBA J 9  
Dorado, PR 00646

TRAFON GROUP  
MERCADO CENTRAL CALLE C 1229  
San Juan, PR 00920

TRANSPORTE DIAZ INC  
NUM 60 HACIENDA PRIMAVERA  
Cidra, PR 00739

TRANSPORTE ESCOLAR GIL INC  
RR 11 BOX 5721  
BO NUEVO  
Bayamon, PR 00956

TRIPLE-S SALUD  
PO BOX 71548  
San Juan, PR 00936-8648

TRUE GUARD SECURITY INC  
161 AVE PONCE DE LEON  
OFICINA 304  
San Juan, PR 00917

UNITED ELECTRICAL SUPPLY INC  
URB REPARTO SEVILLA NUM 959  
CALLE PAGANINI  
San Juan, PR 00924

UNITED ENTREPRENEURS LLC  
URB VILLA CAPARRA  
13 CALLE A  
Guaynabo, PR 00966

UNIVERSAL CARE CORPORATION  
PO BOX 1051  
Sabana Seca, PR 00952-1051

UNIVERSAL FIRE EQUIPMENT  
URB MONTE BELLO  
NUM 5015  
Hormigueros, PR 00660

UNIVERSAL INSURANCE COMPANY  
PO BOX 71338  
San Juan, PR 00936-8438

US DEPARTMENT OF EDUCATION  
FINANCIAL SQUARE  
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VIVIANA CINTRON DIAZ  
UNKNOWN

WALLYS ORTIZ ACOSTA  
NUM 16 CALLEJON FAS  
Cabo Rojo, PR 00623

WESLEY PAGAN GUADALUPE  
BO SAINT JUST  
CALLE 2 148 A  
Trujillo Alto, PR 00976

WORLDNET TELECOMMUNICATIONS INC  
PO BOX 70201  
San Juan, PR 00936-8201

YARITZA CRUZ ALVARADO  
CONDOMINIO CAMINITO 27  
CARR189 APTO 2708  
San Juan, PR 00919

YESENIA COLON CRUZ  
PORTALES DE SAN JUAN  
APT J 175  
San Juan, PR 00924

**Grace Hernández**

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**From:** Luis R. Carrasquillo <luis@cpacarrasquillo.com>  
**Sent:** Wednesday, October 05, 2016 2:21 PM  
**To:** Charles Cuprill; Charles A. Cuprill, PSC Law Offices; Grace Hernández  
**Cc:** "CPA Luis R. Carrasquillo"  
**Subject:** FW: MBTI of Puerto Rico Inc - Bankruptcy Schedules  
**Attachments:** MBTI of Puerto Rico Inc Voluntary Petition, Top 20, Schedules & Matrix P....pdf; MBTI of Puerto Rico Inc Voluntary Petition, Top 20, Schedules & Martrix ....pdf

Charly

E adjunto lo que podemos radicar de MBTI. Luego habrá que enmendar algunos pero están 95% completos. Que Grace llame a Alfredo para que se pongan de acuerdo para el file de Upload del Matrix

El SOFA no está.

Luis R. Carrasquillo Ruiz, CPA, CIRA, CVA



**Calle 28, TI-26**  
**Avenida Turabo Gardens**  
**Caguas P.R. 00725**  
**Tels. 787-746-4555/787-746-4556**  
**Fax 787-746-4564**  
**[luis@cpacarrasquillo.com](mailto:luis@cpacarrasquillo.com)**

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**From:** Alfredo Segarra [<mailto:alfredo@cpacarrasquillo.com>]  
**Sent:** Wednesday, October 5, 2016 12:25 PM  
**To:** 'Luis R. Carrasquillo' <[luis@cpacarrasquillo.com](mailto:luis@cpacarrasquillo.com)>  
**Subject:** RE: MBTI of Puerto Rico Inc - Bankruptcy Schedules

Luis:

Adjunto al email los siguientes anejos de quiebra de MBTI of Puerto Rico, Inc.

- Voluntary Petition
- Top 20 Unsecured Creditors
- Summary of Assets & Liabilities
- Schedule A/B Real & Personal Property
- Schedule D Secured Creditors
- Schedule E/F Priority and Unsecured Creditors
- Schedule G Executory Contracts
- Schedule H Co Debtors
- Matrix

*Alfredo J. Segarra Martínez*



CPA LUIS R. CARRASQUILLO & CO., P.S.C.  
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

**CERTIFIED COPY OF RESOLUTION OF THE BOARD  
OF DIRECTORS AUTHORIZING THE FILING OF  
PETITION FOR REORGANIZATION UNDER CHAPTER 11  
OF THE BANKRUPTCY CODE**

RESOLVED: Whereas MBTI of Puerto Rico, Inc. (the "Corporation") is unable to meet its obligations as they mature; and

Whereas, creditors are threatening suit and have threatened to undertake steps to obtain possession of some of the Corporation's assets; Now therefore,

Be it resolved that a Petition in Proceedings under Chapter 11 of the Bankruptcy Code be filed by the Corporation and that Mrs. Barbara Alonso Vila, the Corporation's President, be and hereby is authorized to execute on behalf of the Corporation and for it all the necessary documents for the filing of a Petition under Chapter 11 of the Bankruptcy Code; and be it further resolved;

That Mrs. Barbara Alonso Vila be and hereby is authorized to pay unto the Clerk of the Court all necessary filing fees required by law by the Corporation or in its behalf, and be it further resolved;

That Charles A. Cuprill, P.S.C., Law Offices be employed to act as counsel for the Corporation in such bankruptcy proceedings.

The undersigned hereby certifies that he is the Secretary of the Corporation, and that the above is a true and correct copy of a resolution adopted by its Board of Directors at a duly constituted meeting held on the October at 1p.m., in accordance with its corporate regulations; that quorum was present at said meeting; that said resolution has not been revoked, modified, annulled or amended in any manner whatsoever.

In witness hereof, I have hereunto set my hand and affixed the seal of the Corporation this 7<sup>th</sup> day of October, 2016.




**(CORPORATE SEAL)**

**FIDEL CARLOS ALONSO VILA  
SECRETARY**

I, Fidel Carlos Alonso Vila, Secretary of MBTI of Puerto Rico, Inc., of legal age, married, and resident of Guaynabo, Puerto Rico do hereby certify under penalty of perjury, that the statements contained in the foregoing document are true according to the best of my knowledge, information and belief.

San Juan, Puerto Rico, this 7<sup>th</sup> day of October, 2016.



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FIDEL CARLOS ALONSO VILA  
**SECRETARY**